



STIC Search Report

EIC 3700

STIC Database Tracking Number: 124545

TO: Samuel Gilbert
Location: cp2 4d25
Art Unit: 3736
Wednesday, June 16, 2004

Case Serial Number: 10/662960

From: Emory Damron
Location: EIC 3700
CP2-2C08
Phone: 305-8587

Emory.Damron@uspto.gov

Search Notes

Dear Samuel,

Please find below an inventor search in the bibliographic and full-text foreign patent files, as well as keyword searches in the patent and non-patent literature files, both bibliographic and full text.

References of potential pertinence have been tagged, but please review all the packets in case you like something I didn't.

In addition to searching on Dialog, I also searched Google.com, and EPO/JPO/Derwent.

I included many internet printouts because there is much out there about this type of therapy, and specifically of the "neuromodulation" variety as espoused by Leslie Feinberg, the inventor here (who is also a chiropractor). I archive-dated them when possible.

Please contact me if I can refocus or expand any aspect of this case, and please take a moment to provide any feedback (on the form provided) so EIC 3700 may better serve your needs.

Sincerely,

Emory Damron

Technical Information Specialist

EIC 3700, US Patent & Trademark Office

Phone: (703) 305-8587/ Fax: (703) 306-5915

Emory.damron@uspto.gov



Access DB# 124545

SEARCH REQUEST FORM

Scientific and Technical Information Center

Requester's Full Name: SAMUEL GILBERT Examiner #: 70632 Date: 6/14/04
 Art Unit: 3736 Phone Number 30 8 3553 Serial Number: 10/662960
 Mail Box and Bldg/Room Location: CP24 D25 Results Format Preferred (circle): PAPER DISK E-MAIL

If more than one search is submitted, please prioritize searches in order of need.

Please provide a detailed statement of the search topic, and describe as specifically as possible the subject matter to be searched. Include the elected species or structures, keywords, synonyms, acronyms, and registry numbers, and combine with the concept or utility of the invention. Define any terms that may have a special meaning. Give examples or relevant citations, authors, etc, if known. Please attach a copy of the cover sheet, pertinent claims, and abstract.

Title of Invention: METHOD OF NEUROMODULATION THERAPY
 Inventors (please provide full names): LESLIE S. FEINBERG

Earliest Priority Filing Date: 15 SEPT 2003

**For Sequence Searches Only* Please include all pertinent information (parent, child, divisional, or issued patent numbers) along with the appropriate serial number.*

SEE ATTACHED

STAFF USE ONLY		Type of Search	Vendors and cost where applicable
Searcher: <u>DAMRON, EMORY</u>	NA Sequence (#) _____	STN _____	
Searcher Phone #: <u>3058587</u>	AA Sequence (#) _____	Dialog <u>X</u> <u>2030.10</u>	
Searcher Location: <u>CP2208</u>	Structure (#) _____	Questel/Orbit _____	
Date Searcher Picked Up: <u>6/14/04 3P</u>	Bibliographic <u>X</u>	Dr.Link _____	
Date Completed: <u>6/16/04 320P</u>	Litigation _____	Lexis/Nexis _____	
Searcher Prep & Review Time: <u>260m</u>	Fulltext <u>X</u>	Sequence Systems _____	
Clerical Prep Time: <u>Q</u>	Patent Family _____	WWW/Internet <u>X</u>	
Online Time: <u>260m</u>	Other _____	Other (specify) _____	

D/ 1

Set	Items	Description
S1	17	AU=(FEINBERG L? OR FEINBERG, L?)
S2	0	LESLIE(2W)FEINBERG
S3	4856	ENERG?()MEDIC? OR (NEUROMODULAT? OR NEURO()MODULAT?)()THER- AP? OR PSYCHOLOG? OR PSYCHIAT? OR PHYSICAL()THERAP? OR PSYCHO- THERAP? OR PSYCHO()THERAP?
S4	242679	IC=A61B?
S5	0	S1:S2 AND S3:S4

? show files

File 347:JAPIO Nov 1976-2004/Feb(Updated 040607)
(c) 2004 JPO & JAPIO

File 350:Derwent WPIX 1963-2004/UD,UM &UP=200437
(c) 2004 Thomson Derwent

?

Set	Items	Description
S1	8	AU=(FEINBERG L? OR FEINBERG, L?)
S2	0	LESLIE(2W)FEINBERG
S3	13741	ENERG?()MEDIC? OR (NEUROMODULAT? OR NEURO()MODULAT?)()THER- AP? OR PSYCHOLOG? OR PSYCHIAT? OR PHYSICAL()THERAP? OR PSYCHO- THERAP? OR PSYCHO()THERAP?
S4	53661	IC=A61B?
S5	0	S1:S2 AND S3:S4

? show files

File 348:EUROPEAN PATENTS 1978-2004/Jun W02
(c) 2004 European Patent Office

File 349:PCT FULLTEXT 1979-2002/UB=20040610,UT=20040603
(c) 2004 WIPO/Univentio

?

Set	Items	Description
S1	568	AU=(FEINBERG L? OR FEINBERG, L?)
S2	23	LESLIE(2W)FEINBERG
S3	3714448	ENERG?()MEDIC? OR (NEUROMODULAT? OR NEURO()MODULAT?)()THER- AP? OR PSYCHOLOG? OR PSYCHIAT? OR PHYSICAL()THERAP? OR PSYCHO- THERAP? OR PSYCHO()THERAP?
S4	33	S1:S2 AND S3
S5	22	RD (unique items)
? show files		
File	94:	JICST-EPlus 1985-2004/May W4 (c)2004 Japan Science and Tech Corp(JST)
File	95:	TEME-Technology & Management 1989-2004/May W4 (c) 2004 FIZ TECHNIK
File	99:	Wilson Appl. Sci & Tech Abs 1983-2004/May (c) 2004 The HW Wilson Co.
File	35:	Dissertation Abs Online 1861-2004/May (c) 2004 ProQuest Info&Learning
File	111:	TGG Natl.Newspaper Index(SM) 1979-2004/Jun 15 (c) 2004 The Gale Group
File	583:	Gale Group Globalbase(TM) 1986-2002/Dec 13 (c) 2002 The Gale Group
File	2:	INSPEC 1969-2004/Jun W1 (c) 2004 Institution of Electrical Engineers
File	6:	NTIS 1964-2004/Jun W2 (c) 2004 NTIS, Intl Cpyrght All Rights Res
File	8:	Ei Compendex(R) 1970-2004/Jun W1 (c) 2004 Elsevier Eng. Info. Inc.
File	34:	SciSearch(R) Cited Ref Sci 1990-2004/Jun W1 (c) 2004 Inst for Sci Info
File	434:	SciSearch(R) Cited Ref Sci 1974-1989/Dec (c) 1998 Inst for Sci Info
File	65:	Inside Conferences 1993-2004/Jun W2 (c) 2004 BLDSC all rts. reserv.
File	473:	FINANCIAL TIMES ABSTRACTS 1998-2001/APR 02 (c) 2001 THE NEW YORK TIMES
File	474:	New York Times Abs 1969-2004/Jun 15 (c) 2004 The New York Times
File	475:	Wall Street Journal Abs 1973-2004/Jun 15 (c) 2004 The New York Times
File	481:	DELPHES Eur Bus 95-2004/May W5 (c) 2004 ACFCI & Chambre CommInd Paris
File	48:	SPORTDiscus 1962-2004/Jun (c) 2004 Sport Information Resource Centre
File	50:	CAB Abstracts 1972-2004/May (c) 2004 CAB International
File	155:	MEDLINE(R) 1966-2004/Jun W1 (c) format only 2004 The Dialog Corp.
File	5:	Biosis Previews(R) 1969-2004/Jun W1 (c) 2004 BIOSIS
File	73:	EMBASE 1974-2004/Jun W1 (c) 2004 Elsevier Science B.V.
File	71:	ELSEVIER BIOBASE 1994-2004/Jun W1 (c) 2004 Elsevier Science B.V.
File	144:	Pascal 1973-2004/Jun W1 (c) 2004 INIST/CNRS
File	1:	ERIC 1966-2004/Jun 09 (c) format only 2004 The Dialog Corporation
File	7:	Social SciSearch(R) 1972-2004/Jun W1 (c) 2004 Inst for Sci Info
File	11:	PsycINFO(R) 1887-2004/May W4 (c) 2004 Amer. Psychological Assn.

← *SIGNIFICANT HITS*

AFTER

REVIEW

File 437:Education Abstracts 1983-2004/May

(c) 2004 The HW Wilson Co

File 121:Brit.Education Index 1976-2004/Q2

(c) 2004 British Education Index

File 142:Social Sciences Abstracts 1983-2004/May

(c) 2004 The HW Wilson Co

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Set	Items	Description
S1	84	AU=(FEINBERG L? OR FEINBERG, L?)
S2	197	LESLIE(2W)FEINBERG
S3	1431722	ENERG?()MEDIC? OR (NEUROMODULAT? OR NEURO()MODULAT?)()THER- AP? OR PSYCHOLOG? OR PSYCHIAT? OR PHYSICAL()THERAP? OR PSYCHO- THERAP? OR PSYCHO()THERAP?
S4	54	S1:S2 AND S3
S5	35	RD (unique items)
? show files		
File 16:	Gale Group PROMT(R)	1990-2004/Jun 15 (c) 2004 The Gale Group
File 160:	Gale Group PROMT(R)	1972-1989 (c) 1999 The Gale Group
File 148:	Gale Group Trade & Industry DB	1976-2004/Jun 15 (c) 2004 The Gale Group
File 149:	TGG Health&Wellness DB(SM)	1976-2004/Jun W1 (c) 2004 The Gale Group
File 621:	Gale Group New Prod. Annou. (R)	1985-2004/Jun 15 (c) 2004 The Gale Group
File 444:	New England Journal of Med.	1985-2004/Jun W2 (c) 2004 Mass. Med. Soc.
File 441:	ESPICOM Pharm&Med DEVICE NEWS	2004/Jun W2 (c) 2004 ESPICOM Bus. Intell.
File 369:	New Scientist	1994-2004/Jun W1 (c) 2004 Reed Business Information Ltd.
File 370:	Science	1996-1999/Jul W3 (c) 1999 AAAS
File 129:	PHIND(Archival)	1980-2004/Jun W1 (c) 2004 PJB Publications, Ltd.
File 130:	PHIND(Daily & Current)	2004/Jun 15 (c) 2004 PJB Publications, Ltd.
File 135:	NewsRx Weekly Reports	1995-2004/Jun W1 (c) 2004 NewsRx
File 98:	General Sci Abs/Full-Text	1984-2004/Jun (c) 2004 The HW Wilson Co.
File 15:	ABI/Inform(R)	1971-2004/Jun 14 (c) 2004 ProQuest Info&Learning
File 9:	Business & Industry(R)	Jul/1994-2004/Jun 14 (c) 2004 The Gale Group
File 47:	Gale Group Magazine DB(TM)	1959-2004/Jun 14 (c) 2004 The Gale group
File 80:	TGG Aerospace/Def. Mkts(R)	1986-2004/Jun 15 (c) 2004 The Gale Group
File 141:	Readers Guide	1983-2004/Jun (c) 2004 The HW Wilson Co
File 482:	Newsweek	2000-2004/Jun 15 (c) 2004 Newsweek, Inc.
File 484:	Periodical Abs Plustext	1986-2004/Jun W1 (c) 2004 ProQuest
File 635:	Business Dateline(R)	1985-2004/Jun 15 (c) 2004 ProQuest Info&Learning
File 636:	Gale Group Newsletter DB(TM)	1987-2004/Jun 14 (c) 2004 The Gale Group
File 646:	Consumer Reports	1982-2004/May (c) 2004 Consumer Union
File 609:	Bridge World Markets	2000-2001/Oct 01 (c) 2001 Bridge
File 649:	Gale Group Newswire ASAP(TM)	2004/Jun 14 (c) 2004 The Gale Group
File 610:	Business Wire	1999-2004/Jun 15 (c) 2004 Business Wire.



SIGNIFICANT

HITS

AFTER

REVIEW

File 613:PR Newswire 1999-2004/Jun 15
 (c) 2004 PR Newswire Association Inc
File 809:Bridge World Markets News 1989-1999/Dec 31
 (c) 1999 Bridge
File 810:Business Wire 1986-1999/Feb 28
 (c) 1999 Business Wire
File 813:PR Newswire 1987-1999/Apr 30
 (c) 1999 PR Newswire Association Inc
File 20:Dialog Global Reporter 1997-2004/Jun 15
 (c) 2004 The Dialog Corp.
File 570:Gale Group MARS(R) 1984-2004/Jun 15
 (c) 2004 The Gale Group
File 88:Gale Group Business A.R.T.S. 1976-2004/Jun 14
 (c) 2004 The Gale Group
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Set	Items	Description
S1	5268	PSYCHIAT? OR PSYCHOSOMAT? OR PSYCHOLOG? OR PHYSIC?()THERAP? OR PSYCHOTHERAP? OR PSYCHO()THERAP? OR CHIROPRACT?
S2	265	ENERG?(2N) (HEALTHCARE OR HEALTH()CARE OR MEDICIN?) OR NEUR- OMODULAT? OR NEURO()MODULAT? OR NMT
S3	47596	PATHWAY? OR PATH() (WAY OR WAYS) OR QUERIE? OR QUERY? OR QU- ESTION? OR INTERROGAT? OR INTERVIEW?
S4	131	(MUSCLE()RESPONSE) (5N) (TEST? OR RATE? ? OR RATING OR ASSES- S? OR APPRAIS? OR EVALUAT? OR MEASUR? OR DETERMIN? OR ESTIMAT? OR GAUG? OR DIAGNOS? OR MONITOR?) OR MRT
S5	381	(PATIENT? OR SUBJECT? ?) (10N) (PRACTITIONER? OR THERAPIST?)
S6	242	DNFT OR DIRECT() (NONFORCE OR NON()FORCE) ()TECHNIQUE OR MUS- CLE()TEST? OR (ORING OR O()RING) ()TEST? OR LEG()LENGTH()TEST? OR PHYSIC?()STIMULAT?
S7	11	(SEMANTIC? OR CLINIC?) (3N)ALGORITHM?
S8	0	(CONCIOUS? OR SUBCONCIOUS?) ()LEVEL?
S9	0	(OPTIM? OR CORRECT?) (2N) (COMMAND()STATEMENT?) OR (VERBAL? - OR NONVERBAL?) ()CORRECT?()COMMAND?
S10	7360	DYSFUNCTION? OR AUTONOMIC?() (FUNCTION? OR RESPONSE?)
S11	2703320	POSTUR? OR POSITION?
S12	68	(PATHWAY? OR PATH() (WAY OR WAYS)) (3N) (PERNICIOUS? OR SENSO- RY? OR MOTOR? OR ALLERG? OR INFECT? OR EXOGENOUS? OR TOXIN? OR MORPHIC?)
S13	4129401	METHOD? ?
S14	3008436	SYSTEM? ?
S15	2434808	PROCESS??
S16	199639	PROCEDURE? ?
S17	223146	TECHNIQUE? ?
S18	242679	IC=A61B?
S19	5527	S1:S2
S20	748	S19 AND S18
S21	3028	S19 AND S13:S17
S22	5527	S19:S21
S23	197	S22 AND S3
S24	18	S23 AND (S4:S10 OR S12)
S25	20	S23 AND S11
S26	312	S22 AND (S4:S10 OR S12)
S27	55	S26 AND S11
S28	89	S24:S25 OR S27
S29	89	IDPAT (sorted in duplicate/non-duplicate order)

? show files

File 347:JAPIO Nov 1976-2004/Feb(Updated 040607)

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File 350:Derwent WPIX 1963-2004/UD,UM &UP=200437

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29/3,K/18 (Item 18 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2004 Thomson Derwent. All rts. reserv.

015405745 **Image available**
WPI Acc No: 2003-467886/200344
XRPX Acc No: N03-372419

Providing spinal postural biofeedback to patient using taping for physical medicine treatment, by applying tapes to spine of patient to stimulate patient's skin and provide biofeedback if patient moves in non-compliant manner

Patent Assignee: BRONDER C (BRON-I)

Inventor: BRONDER C

Number of Countries: 001 Number of Patents: 001

Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week
US 20030098028	A1	20030529	US 2001997881	A	20011129	200344 B

Priority Applications (No Type Date): US 2001997881 A 20011129

Patent Details:

Patent No Kind Lan Pg Main IPC Filing Notes

US 20030098028 A1 4 A61B-019/00

Providing spinal postural biofeedback to patient using taping for physical medicine treatment, by applying tapes to spine of...

Abstract (Basic):

... The **method** involves applying undertape and overtape to the spine of a patient, in which the combination...

... For physical medicine treatments used by e.g. **chiropractors**, **physical therapists**, athletic trainers, nurses, osteopathic, allopathic physicians to treat pain or **dysfunction** commonly associated with muscoskeletal disorders, conditions or injuries e.g. back and neck disorders, conditions...

...any loss of muscular stabilization tone commonly associated with prolonged use of a brace. Provides **postural** biofeedback whether patient is awake or sleeping. Enables clinician if patient complied with provided instructions to maximize therapeutic benefit of therapeutic **procedure**.

...The figure is a flowchart showing the steps in providing spinal **postural** biofeedback to patient using taping

International Patent Class (Main): **A61B-019/00**

29/3,K/26 (Item 26 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2004 Thomson Derwent. All rts. reserv.

015179409 **Image available**
WPI Acc No: 2003-239939/200323
XRPX Acc No: N03-191103

Diagnostic method for assisting professional person e.g. medical practitioner to advise client, in which questions presented to client are analysed according to predefined indicators for each question
Patent Assignee: MEDIVISION INT PTY LTD (MEDI-N); CLARKSON J G (CLAR-I)
Inventor: CLARKSON J G

Number of Countries: 100 Number of Patents: 003

Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week
WO 200319428	A1	20030306	WO 2002AU1127	A	20020821	200323 B
AU 200197221	A	20030227	AU 200197221	A	20011213	200323
US 20030046305	A1	20030306	US 200123429	A	20011213	200331

Priority Applications (No Type Date): US 200123429 A 20011213; AU 20017247 A 20010824; AU 200197221 A 20011213

Patent Details:

Patent No	Kind	Lan Pg	Main IPC	Filing Notes
WO 200319428	A1	E 30	G06F-017/60	

Designated States (National): AE AG AL AM AT AU AZ BA BB BG BR BY BZ CA CH CN CO CR CU CZ DE DK DM DZ EC EE ES FI GB GD GE GH GM HR HU ID IL IN IS JP KE KG KP KR KZ LC LK LR LS LT LU LV MA MD MG MK MN MW MX MZ NO NZ OM PH PL PT RO RU SD SE SG SI SK SL TJ TM TN TR TT TZ UA UG US UZ VN YU ZA ZM ZW

Designated States (Regional): AT BE CH CY DE DK EA ES FI FR GB GH GM GR IE IT KE LS LU MC MW MZ NL OA PT SD SE SL SZ TR TZ UG ZM ZW

AU 200197221	A	G06F-017/60
US 20030046305	A1	G06F-017/00

Diagnostic method for assisting professional person e.g. medical practitioner to advise client, in which questions presented to client are analysed according to predefined indicators for each question

Abstract (Basic):

... Professional advisers e.g. medical practitioners prescribe tests in the form of a series of questions for a patient prior to an appointment, and receive the results of the questions along with an indication of the relevance of the subject matter of the questions to the patient.

... A computer system presents a questionnaire to a client on a screen. The questionnaire includes a number of questions from which the client can select one or more answers. Each possible answer has an associated numerical value and, by adding up the value for the selected answers, the computer system is able to provide indications regarding the client's position to the professional person. INDEPENDENT CLAIMS are included for; an apparatus for assisting a professional...

...Assisting professional advisors e.g. medical practitioners to advise clients e.g. to diagnose psychiatric disorders...

...task or advise a client. Patient benefits from an analysis of the results of the questions in which conditions that may have been overlooked by the medical practitioner in reviewing the answers, will be indicated by the computer system and drawn to the attention of the practitioner...

...Title Terms: METHOD ;

29/3,K/32 (Item 32 from file: 350)
DIALOG(R)File 350:Derwent WPIX
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015068714

WPI Acc No: 2003-129230/200312

Related WPI Acc No: 2003-075744; 2003-503302; 2003-540098; 2003-687664;
2003-708678

XRAM Acc No: C03-033023

XRPX Acc No: N03-102685

New computer system that collects physical, biological or behavioral data from a subject, useful in drug discovery, e.g. assessing toxic side effects of drugs, interactions among medicines, or effects of environmental manipulation

Patent Assignee: BRUNNER D (BRUN-I); PSYCHOGENICS INC (PSYC-N)

Inventor: BRUNNER D; GONDHALEKAR V; LAROSE D; LEAHY E; ROSS W P

Number of Countries: 101 Number of Patents: 002

Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week
WO 200292101	A1	20021121	WO 2002US15981	A	20020515	200312 B
EP 1397144	A1	20040317	EP 2002746424	A	20020515	200420
			WO 2002US15981	A	20020515	

Priority Applications (No Type Date): US 2001326271 P 20011001; US
2001291039 P 20010515

Patent Details:

Patent No	Kind	Lan	Pg	Main IPC	Filing Notes
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WO 200292101	A1	E	89	A61K-031/56	
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Designated States (National): AE AG AL AM AT AU AZ BA BB BG BR BY BZ CA
CH CN CO CR CU CZ DE DK DM DZ EC EE ES FI GB GD GE GH GM HR HU ID IL IN
IS JP KE KG KP KR KZ LC LK LR LS LT LU LV MA MD MG MK MN MW MX MZ NO NZ
OM PH PL PT RO RU SD SE SG SI SK SL TJ TM TN TR TT TZ UA UG US UZ VN YU
ZA ZM ZW

Designated States (Regional): AT BE CH CY DE DK EA ES FI FR GB GH GM GR
IE IT KE LS LU MC MW MZ NL OA PT SD SE SL SZ TR TZ UG ZM ZW

EP 1397144	A1	E		A61K-031/56	Based on patent WO 200292101
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Designated States (Regional): AL AT BE CH CY DE DK ES FI FR GB GR IE IT
LI LT LU LV MC MK NL PT RO SE SI TR

New computer system that collects physical, biological or behavioral data from a subject, useful in drug discovery, e...

Abstract (Basic):

... A computer **system**, which is for mining several experimentally derived information to identify a pattern, is new. The computer **system** comprises measurement databases, a **query** server program, a database searching program, and a reporting program that collects a variety of

... The computer **system** for mining several experimentally-derived information to identify a pattern comprises...

...b) a **query** server program that receives **query** behavioral, neurological, biochemical and/or physiological data from one or more users of the **system** ;
(...

...c) a database searching program that compares **query** data with a signature derived from, or with entries from, the previous animal experiments represented...

...that generates reports including information representative of the degree of correlation, if any, between the **query** data, and the signature or data entries in the measurement databases...

...1) a computer-implemented **method** of identifying potential modes of action of a candidate drug...

...6) an animal cage **system** for automated monitoring of animal behavior

...

...The computer **system** or **methods** are useful as part of a discovery program for new therapeutic candidates, or as part of a discovery program for detecting unanticipated neurological or **psychiatric** applications for drugs that were previously investigated for use in other therapeutic areas. The **system** or **methods** are also useful as part of a profiling program for assessing potential side-effects of...

...types of patients are likely to be at risk when using a particular medicine. The **system** or **method** is also useful for assessing potential therapeutic effects of a drug, assessing potential toxic side

Technology Focus:

... Preferred **Method** : In **method** (1), identifying potential modes of action of a candidate drug comprises...

...a) providing the novel computer **system** ;
 (...)

...b) providing access to the computer **system** by users to input **query** data; and...

...users and the reporting program for reporting to the users correlations, if any, between the **query** data input by the user, and the activity of the drug or its classes, environmental...

...In **method** (2), predicting potential modes of action of a test compound comprises...

...In **method** (3), predicting potential modes of action of an environmental or genetic effect on an animal...In **method** (4), identifying potential therapeutic applications of test compounds comprises...

...a) providing the novel **system** ;
 (...)

...Preferred Computer **System** : The signature is a Markov signature or a neural net. The signature is generated by one or more data-mining **techniques** consisting of an association rules **method** , a data classification **method** , a sequence pattern mining **method** , or a clustering **method** . The signature is also generated by a principal component analysis **method** , a K-means and fuzzy clustering **method** , a serial linkage **method** , a nearest neighbor **method** , a logistic regression **method** , a support vector machine **method** , a Bayes classification **method** , and/or a Kohonen self organizing maps clustering **method** . The database includes behavioral data representative of one or more of the following: sleeping, grooming...

...The neurological data includes one or more EEG data, data concerning changes in central nervous **system** (CNS) structures and/or function (including size and location of necrotic tissue), occurrence of seizures...O2 and/or CO2. The database and (optionally) the signature

are updated to include the **query** data. The database is an annotated database including information representative of the mechanism of action of drugs for which behavioral information has been included in the database. The animal cage **system** for automated monitoring of animal behavior comprises...

...image capturing device arranged relative to the animal observation area to capture movement and bodily **positions** of an animal in the observation area...

...rate, liquid intake rate, piloerection, perspiration, blood pressure, or neural activity. This apparatus or cage **system** further includes software for comparing images of the animal from one or more image capture devices, and generating data representative of movement and/or bodily **positions** of the animal. The data representative of movement and/or bodily **positions** of the animal includes time code information ...

...device arranged relative to the animal observation area, so as to capture movement and bodily **positions** of an animal in the animal observation area...

...Title Terms: **SYSTEM** ;

29/3,K/43 (Item 43 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2004 Thomson Derwent. All rts. reserv.

014518234 **Image available**
WPI Acc No: 2002-338937/200237
Related WPI Acc No: 2000-104862
XRPX Acc No: N02-266530

**Treating method for psychiatric patient and physiologic symptoms,
involves inducing bilateral stimulations to patient's body, through
tactile stimulators bilaterally positioned along patient's body**

Patent Assignee: SCHMIDT J G (SCHM-I); SCHMIDT S J (SCHM-I)

Inventor: SCHMIDT J G; SCHMIDT S J

Number of Countries: 001 Number of Patents: 001

Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week
US 20020035995	A1	20020328	US 97943844	A	19970722	200237 B
			US 99375109	A	19990816	

Priority Applications (No Type Date): US 99375109 A 19990816; US 97943844 A 19970722

Patent Details:

Patent No	Kind	Lan	Pg	Main IPC	Filing Notes
US 20020035995	A1		10	A61H-001/00	CIP of application US 97943844
					CIP of patent US 6001073

**Treating method for psychiatric patient and physiologic symptoms,
involves inducing bilateral stimulations to patient's body, through
tactile stimulators bilaterally positioned along patient's body**

Abstract (Basic):

... The **method** involves bilaterally **positioning** two or more tactile stimulators (20A,20B) on two or more areas of the patient...

...more tactile stimulators in an alternating fashion. The tactile stimulators are transferred to different bilateral **positions** and the induction of bilateral stimulation is repeated.

... For **psychiatric** patient and physiologic symptoms e.g. clinical depression, addictive disorder, eating disorder, obsessive/compulsive disorder, dissociative disorder, sexual **dysfunction**, anxiety, panic disorder, learning disabilities, attention deficit disorder...

...Ensures reliable treating of e.g. physiologic symptoms. Simplifies treating **process**.

...The figure shows the isometric explanatory diagram of the treating **process**.

...Title Terms: **METHOD** ;

29/3,K/69 (Item 69 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2004 Thomson Derwent. All rts. reserv.

012048562

WPI Acc No: 1998-465472/199840

XRPX Acc No: N98-362542

Patient with excessive fat body condition treating - by beginning session
from individual psychotherapy of second time arriving patients and
performing their individual and group interview

Patent Assignee: MIRKIN V I (MIRK-I)

Inventor: MIRKIN V I

Number of Countries: 001 Number of Patents: 001

Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week
RU 2104719	C1	19980220	RU 97108514	A	19970605	199840 B

Priority Applications (No Type Date): RU 97108514 A 19970605

Patent Details:

Patent No	Kind	Lan	Pg	Main IPC	Filing Notes
RU 2104719	C1		6	A61M-021/00	

... by beginning session from individual psychotherapy of second time
arriving patients and performing their individual and group interview
...Abstract (Basic): of group members by attained results that is then used
as an indirect information for psychotherapy . Then the patient is set
in a Romberg position , followed by introducing a verbal
psychological set-up related to amount of kilograms of lost weight for
a next week. A...

...ADVANTAGE - Simpler method and stabilisation of attained results...

...Title Terms: PSYCHOTHERAPEUTIC ;

29/3,K/72 (Item 72 from file: 350)
DIALOG(R)File 350:Derwent WPIX
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011603593 **Image available**
WPI Acc No: 1998-020721/199803
XRPX Acc No: N98-015800

Apparatus for physical therapy of back musculature in humans -
incorporates lying mat over which projects at least one pressure body,
its position on mat being variable

Patent Assignee: MORGER O (MORG-I)

Inventor: MORGER O

Number of Countries: 022 Number of Patents: 002

Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week
EP 811365	A2	19971210	EP 97810356	A	19970606	199803 B
CH 691346	A5	20010713	CH 961435	A	19960607	200148

Priority Applications (No Type Date): CH 961435 A 19960607

Patent Details:

Patent No	Kind	Lan	Pg	Main IPC	Filing Notes
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EP 811365	A2	G	7	A61H-015/00	
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Designated States (Regional): AL AT BE CH DE DK ES FI FR GB GR IE IT LI
LT LU LV MC NL PT SE SI

CH 691346	A5	A61H-015/00
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Apparatus for physical therapy of back musculature in humans...

...incorporates lying mat over which projects at least one pressure body,
its position on mat being variable

...Abstract (Basic): The lying mat (1) incorporates accommodations (10) for
the several pressure bodies (2), the position of which in relation to
one another is variable. The pressure bodies are balls (2...

...ADVANTAGE - The apparatus effectively replaces various massage
techniques, acupuncture and acu-pressure which have to be carried out
by a trained practitioner, are cost-intensive and time-consuming for
the patient.

...Title Terms: POSITION ;

29/3,K/76 (Item 76 from file: 350)
DIALOG(R)File 350:Derwent WPIX
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011213253

WPI Acc No: 1997-191178/199717

XRFX Acc No: N97-157982

Method of restitution of psycho-physical condition in humans - by
rational psychotherapy , conduct to the state of meditation and massage
in the position of lying on back or abdomen accompanied by background
music and verbal interaction

Patent Assignee: KARACHANOVA L M (KARA-I)

Inventor: KARACHANOV V G; KARACHANOVA L M

Number of Countries: 001 Number of Patents: 001

Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week
RU 2065758	C1	19960827	RU 95113435	A	19950811	199717 B

Priority Applications (No Type Date): RU 95113435 A 19950811

Patent Details:

Patent No	Kind	Lan	Pg	Main IPC	Filing Notes
RU 2065758	C1		5	A61M-021/00	

Method of restitution of psycho-physical condition in humans...
...by rational psychotherapy , conduct to the state of meditation and
massage in the position of lying on back or abdomen accompanied by
background music and verbal interaction

...Abstract (Basic): The procedure includes preliminary rational
psychotherapy , conduct to the state of meditation, and body massage.
The massage is carried out in the position of lying on back or
abdomen in the form of point massage of face, head...

...It is required, in the process of restitution, to explain to patient
the questions of being, cognition of self, life, and other humans,
and therefore the verbal interaction is...

...USE/ADVANTAGE - In medicine, in particular in method of non-medicament
restitution of psychophysical state of humans and improvements of
bodily functions; useful in psychotherapy of illnesses and
prophylaxis. The restitution of psychophysical state is without
suppression of free will...

Title Terms: METHOD ;

29/3,K/80 (Item 80 from file: 350)
DIALOG(R)File 350:Derwent WPIX
(c) 2004 Thomson Derwent. All rts. reserv.

009511607 **Image available**
WPI Acc No: 1993-205143/199325
XRPX Acc No: N93-157767

Psychotherapy appts. for treating undesirable emotional arousal of
patient - provides treatment through coordinated and controlled
presentation of visual and auditory stimuli to patient controlled in
response to measuring physiological responses of patient to stimuli

Patent Assignee: WEATHERS L R (WEAT-I)

Inventor: WEATHERS L R

Number of Countries: 037 Number of Patents: 006

Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week
US 5219322	A	19930615	US 92891696	A	19920601	199325 B
WO 9324171	A1	19931209	WO 93US5062	A	19930527	199350
AU 9343954	A	19931230	AU 9343954	A	19930527	199415
EP 644786	A1	19950329	EP 93914210	A	19930527	199517
			WO 93US5062	A	19930527	
JP 7508432	W	19950921	WO 93US5062	A	19930527	199546
			JP 94500780	A	19930527	
EP 644786	A4	19960103	EP 93914210	A	19930000	199633

Priority Applications (No Type Date): US 92891696 A 19920601

Patent Details:

Patent No	Kind	Lan	Pg	Main IPC	Filing Notes
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US 5219322	A		10	A61M-021/00	
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WO 9324171	A1		30	A61M-021/00	
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Designated States (National): AT AU BB BG BR CA CH DE DK ES FI GB HU JP
KP KR LK LU MG MN MW NL NO PL RO RU SD SE

Designated States (Regional): AT BE CH DE DK ES FR GB GR IE IT LU MC NL
OA PT SE

AU 9343954	A			A61M-021/00	Based on patent WO 9324171
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EP 644786	A1 E	2		A61M-021/00	Based on patent WO 9324171
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Designated States (Regional): DE FR GB IT

JP 7508432	W		8	A61M-021/02	Based on patent WO 9324171
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EP 644786	A4			A61M-021/00	
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Psychotherapy appts. for treating undesirable emotional arousal of
patient...

...Abstract (Basic): The phsychotherapy apparatus includes a display for
presenting visual stimuli observable by a stationarily- positioned
patient at right and left extremes of the patient's range of lateral
eye movement...

...ADVANTAGE - Reduces number of treatment sessions, increases number of
patients handled by given therapist .

Title Terms: PSYCHOTHERAPEUTIC ;

Set	Items	Description
S1	14561	PSYCHIAT? OR PSYCHOSOMAT? OR PSYCHOLOG? OR PHYSIC?()THERAP? OR PSYCHOTHERAP? OR PSYCHO()THERAP? OR CHIROPRACT? OR BIOFEE- DBACK? OR BIO()FEEDBACK?
S2	2605	ENERG?(2N) (HEALTHCARE OR HEALTH()CARE OR MEDICIN?) OR NEUR- OMODULAT? OR NEURO()MODULAT? OR NMT OR ACUPRESS? OR ACU()PRES- S?
S3	192252	PATHWAY? OR PATH() (WAY OR WAYS) OR QUERIE? OR QUERY? OR QU- ESTION? OR INTERROGAT? OR INTERVIEW?
S4	1062	(MUSCLE()RESPONSE) (5N) (TEST? OR RATE? ? OR RATING OR ASSES- S? OR APPRAIS? OR EVALUAT? OR MEASUR? OR DETERMIN? OR ESTIMAT? OR GAUG? OR DIAGNOS? OR MONITOR?) OR MRT
S5	5911	(PATIENT? OR SUBJECT? ?) (10N) (PRACTITIONER? OR THERAPIST?)
S6	410	DNFT OR DIRECT() (NONFORCE OR NON()FORCE) ()TECHNIQUE OR MUS- CLE()TEST? OR (ORING OR O()RING) ()TEST? OR LEG()LENGTH()TEST? OR PHYSIC?()STIMULAT?
S7	169	(SEMANTIC? OR CLINIC?) (3N)ALGORITHM?
S8	2	(CONCIOUS? OR SUBCONCIOUS?) ()LEVEL?
S9	0	(OPTIM? OR CORRECT?) (2N) (COMMAND()STATEMENT?) OR (VERBAL? - OR NONVERBAL?) ()CORRECT?()COMMAND?
S10	19617	DYSFUNCTION? OR AUTONOMIC?() (FUNCTION? OR RESPONSE?)
S11	930774	POSTUR? OR POSITION?
S12	1141	(PATHWAY? OR PATH() (WAY OR WAYS)) (3N) (PERNICIOUS? OR SENSO- RY? OR MOTOR? OR ALLERG? OR INFECT? OR EXOGENOUS? OR TOXIN? OR MORPHIC?)
S13	1323268	METHOD? ?
S14	1155122	SYSTEM? ?
S15	1026429	PROCESS??
S16	451222	PROCEDURE? ?
S17	581669	TECHNIQUE? ?
S18	53661	IC=A61B?
S19	16737	S1:S2
S20	1122	S19 AND S18
S21	16176	S19 AND S13:S17
S22	16737	S19:S21
S23	6857	S22 AND S3
S24	2650	S23 AND (S4:S10 OR S12)
S25	944	S23 AND (S4:S9 OR S12)
S26	2650	S24:S25
S27	282	S26 AND S3(5N) (S4:S10 OR S12)
S28	165	S26 AND S1:S2(5N) (S4:S10 OR S12)
S29	15	S27 AND S28
S30	432	S27:S28
S31	27	S30 AND S11(5N)S3
S32	293	S25 AND (S4 OR S6 OR S7 OR S8 OR S12)
S33	23	S32 AND S18
S34	62	S29 OR S31 OR S33
S35	62	IDPAT (sorted in duplicate/non-duplicate order)

? show files

File 348:EUROPEAN PATENTS 1978-2004/Jun W02

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File 349:PCT FULLTEXT 1979-2002/UB=20040610,UT=20040603

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?

35/3,K/26 (Item 26 from file: 349)
DIALOG(R) File 349:PCT FULLTEXT
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00923092 **Image available**

A METHOD AND SYSTEM FOR MONITORING SEDATION, PARALYSIS, AND
NEURAL-INTEGRITY

METHODE ET SYSTEME DE SURVEILLANCE DES ETATS DE SEDATION, DE PARALYSIE,
ET D'INTEGRITE NEURALE

Patent Applicant/Assignee:

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Inventor(s):

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Legal Representative:

BURKE Alexander J (et al) (agent), Siemens Corporation - Intellectual
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Patent and Priority Information (Country, Number, Date):

Patent: WO 200256764 A2-A3 20020725 (WO 0256764)

Application: WO 2002US413 20020108 (PCT/WO US0200413)

Priority Application: US 2001262179 20010117; US 2001991360 20011120

Designated States: CN IN JP NO

(EP) AT BE CH CY DE DK ES FI FR GB GR IE IT LU MC NL PT SE TR

Publication Language: English

Filing Language: English

Fulltext Word Count: 3742

A METHOD AND SYSTEM FOR MONITORING SEDATION, PARALYSIS, AND
NEURAL-INTEGRITY

METHODE ET SYSTEME DE SURVEILLANCE DES ETATS DE SEDATION, DE PARALYSIE,
ET D'INTEGRITE NEURALE

Main International Patent Class: A61B-005/11

International Patent Class: A61B-005/0484

Fulltext Availability:

Detailed Description

Claims

English Abstract

The present invention relates to a **system** comprising a small stimulator unit (10) which is designed to be mounted near the patient and the associated **method**. A single cable (12) connects the simulator unit to the patient monitor (15). This cable...

French Abstract

L'invention concerne un procede et un **systeme** dans lequel un petit stimulateur est concu pour etre monte a cote du patient. Un...

Detailed Description

A **METHOD** AND **SYSTEM** FOR MONITORING SEDATION, PARALYSIS
AND NEURAL - INTEGRITY

This is a nonprovisional application of provisional application...

...2001.

BACKGROUND OF THE INVENTION

1. Field of the Invention

The present invention relates a **method** and a **system** for monitoring sedation, paralysis and neural integrity as is required in surgical and intensive care environments. In particular the present invention relates to a compact and affordable **method** and **system** for monitoring these

parameters.

2. Field of the Invention

In the course of their practice...

...Sedation

Sedatives are administered to render a patient unconscious, prevent stress to the Central Nervous **System**, and eliminate pain. Care must be taken to avoid oversedating, which wastes expensive anesthetic, delays...

...Under-sedating is also a serious problem, which may cause patients to awaken during the **procedure**. Continual assessment of the correct level of sedation is therefore necessary. Anesthesiologist normally rely on...

...to ensure the adequacy of sedation, but these signs are not present in certain surgical **procedures**, such as heart bypass surgery, leaving the anesthesiologist without any measure of sedation.

A patient...

...they are presenting is erroneous.

Mid-latency Auditory Potentials (MLAEP) have been proposed as a **method** to determine sedation which overcomes the difficulties seen with raw EEG and derived i 0...

...EEG while auditory tones are issued to the patient via headphones, and applying signal processing **techniques** to remove all but those signals which are correlated to the tone, so that over...

...ulnar nerve is stimulated at the wrist, and the thumb response is observed. However, this **method** is not easily quantifiable, and the documentation must be done manually. An improved variant of this **technique** utilizes a **method** of measuring the thumb response directly, and performing calculations on this response to determine paralysis...

...parameters are objective, convenient to obtain, and may be documented automatically.

Neural Integrity

Certain surgical **procedures** such as spinal surgery may compromise the integrity of **motor** and **sensory** nerve **pathways**. Any surgery on or near the spine may damage the spinal cord, and any damage must be detected as soon as possible to prevent permanent injury. A standard **procedure** to attempt to detect any damage is to partially waken the patient, and instruct him/her to "wiggle your toes" upon command. This **technique** is slow, delaying the surgery and only gives sporadic, subjective measures of **pathway** integrity.

A superior **method** which gives continuous, objective measures is to use Somatosensory Evoked Potentials (SEP). Any electric stimulus...

...as the Radial nerve, and a response is observed in the patients EEG. Signal processing **techniques** similar to the MLAEP are performed to obtain a waveform of brain patterns correlated to...is required to learn several different interfaces. Therefore it would be desirable to provide a **method** and **system** for monitoring these parameters which overcomes the aforementioned drawbacks of the prior art proposals.

SUMMARY OF THE INVENTION

The present invention provides a **method** and a **system** for integrating all of these anesthesia monitoring functions into a single module, which

has the...

...the embodiment of FIG. 1, as described above, the anesthesiologist may monitor only Neuromuscular Transmission (NMT). In this embodiment no EEG module is connected to the **system** . A single cable is connected between the stimulator unit and the patient, which terminates as...

...temperature. Information from the stimulator unit I 0 to the Patient Monitor (FIG. 12A) includes NMT Data (I 2b) which is neuromuscular transmission data . Data from the Patient Monitor 15 to the stimulator module or unit I 0 along cable 12 includes NMT configuration data (12,c see FIG. 12B) to the stimulator/ NMT module IO. This stimulator unit (IO) reports the NMT -only configuration to the Patient Monitor (I 5), which enables only the NMT configuration menus, simplifying I 0 theuserinterface. Commands(12c)arethensentfromthePatientMonitor(15)tothe stimulator unit (IO) to start or stop NMT measurements, and to adjust the configuration. Parameters, technical conditions and waveforms are sent from the...

...20) is connected to the stimulator unit (I 0). This embodiment provides for monitoring of NMT , SEP and EEG signals. In this embodiment cable 12 again provides isolated power from the Patient Monitor 15 to the stimulator / NMT module IO as well as a 2 way communication between the stimulator/ NMT module (I 0) and the Patient Monitor 1 5.

The EEG module (20) is connected to the stimulator / NMT module 10 by a cable 13 which provides for a isolated power between the stimulator / NMT module IO and the EEG module 20 as well as two way communication between the stimulator / NMT module 1 0 and the EEG module 20 where data is provided from the EEG module 20 to the stimulator module/ NMT module 1 0 and configuration and a trigger I 0 13c is sent from the stimulator/ NMT module (1 0) to the EEG Module (20).

Information from the stimulator / NMT module IO to the Patient Module (20) includes NMT , EEG and EP data. The stimulator / NMT module (1 0) receives EEG data from the EEG module 20. The Patient Monitor 15 sends data to the stimulator/ NMT module IO along cable 12. The Patient Module 15 provides NMT , EEG, EP configurations to the stimulator / NMT module IO along cable 12.

The EEG module20 includes electrodes 17 a-d for monitoring...

Claim

1 An adaptive **system** for monitoring neurological electrical activity, comprising:
an electrical stimulation signal generator;
an acoustic stimulation signal...

...electrical stimulation differently to electrical signals derived in response to acoustic stimulation.

2 The adaptive **system** according to claim 1 wherein said electrical stimulator generator is formed of one or more separate units to each said unit serving a different stimulus modality.

3 The adaptive **system** according to claim1 wherein said electrical stimulator generator is formed of one or more separate...

...located at and to provide to stimulus for a different body location.

4 The adaptive **system** according to claim1 wherein said acoustic stimulator generator is formed of one or more separate units to each said unit serving a different stimulus modality.

5 The adaptive **system** according to claim1 wherein said acoustic stimulator generator is formed of one or more separate...

...located at and to provide to stimulus for a different body location.

6 The adaptive **system** according to claim 1, wherein said adaptive **system** also monitors neuromuscular activity and said conditioning network conditions electrical signals representing muscular activity, I...

...configured for processing conditioned electrical signals derived by electrical stimulation of muscle.

7 The adaptive **system** according to claim I wherein said stimulator is a single electrical stimulation generator circuit for monitoring both neuromuscular transmission monitoring and somatosensory evoked potential.

8. The adaptive **system** according to claim 1 wherein said electrodes are a single pair of electrodes for monitoring both **NMT** and SEP.

9 The adaptive **system** according to claim 1 wherein said stimulator is a stimulator device adapted to auto-configures...

...a neuromuscular transmission monitoring device only when not connected to said EEG module. . The adaptive **system** according to claim I further comprising a digital serial interface for sending trigger information from...

...to an EEG device for synchronization with a spontaneous EEG signal. 1 1. The adaptive **system** according to claim1 further comprising a single trigger line for transmitting a combined time-of...

...different stimulation modes or sites when triggering an EEG device. I 0

12 The adaptive **system** according to claim1 wherein said probes are a single pair of stimulator probes to illicit SEP and **NMT** signals either independently or simultaneously.

13 The adaptive **system** according to claim1 further comprising said electrodes coupled to said conditioning network are a single...

...of electrodes for monitoring muscle and neurological electrical activity of a patient.

14 An adaptive **system** for monitoring neurological electrical activity, comprising:
an electrical stimulation signal generator;
a conditioning network for...

...electrical stimulation differently to electrical signals derived in response to acoustic stimulation.

15 The adaptive **system** according to claimI4 wherein said electrical stimulator generator is formed of one or more separate units to each said

unit serving a different stimulus modality.

16 The adaptive **system** according to claim I4 wherein said electrical stimulator generator is formed of one or more separate...

...located at and to provide to stimulus for a different body location.

17 The adaptive **system** according to claim 14 wherein said acoustic stimulator generator is formed of one or more separate units to each said unit serving a different stimulus modality.

18 The adaptive **system** according to claim I 4 wherein said acoustic stimulator generator is formed of one or...

...located at and to provide to stimulus for a different body location.

19 An adaptive **system** according to claim 14, wherein said conditioning network conditions electrical signals representing acoustic stimulation activity...

...is adaptively configured for processing conditioned electrical signals derived by acoustic stimulation.

20 The adaptive **system** according to claim 14 wherein said stimulator is a single electrical stimulation generator circuit for monitoring both neuromuscular transmission monitoring and somatosensory evoked potential.

21. The adaptive **system** according to claim 14 wherein said electrodes are a single pair of electrodes for monitoring both **NMT** and SEP signals. I 0 22. The adaptive **system** according to claim 14 wherein said stimulator is a stimulator device adapted to auto-configures...

...neuromuscular transmission monitoring device only when not connected to said EEG module.

23 The adaptive **system** according to claim 14 further comprising a digital serial interface for sending trigger information from...

...stimulator to an EEG device for synchronization with a spontaneous EEG signal.

24 The adaptive **system** according to claim 14 further comprising a single trigger line for transmitting a combined time...

...differentiate among different stimulation modes or sites when triggering an EEG device.

25 The adaptive **system** according to claim 14 wherein said probes are a single pair of stimulator probes to illicit SEP and **NMT** either independently or simultaneously.

26 The adaptive **system** according to claim I4 further comprising said electrodes coupled to said conditioning network are a single pair of electrodes for monitoring muscle and neurological electrical activity of a patient.

27 A **method** for monitoring neurological electrical activity, the steps comprising:
generating an electrical stimulation signal;
generating an...

...said electrical stimulation differently to electrical signals derived in

response to acoustic stimulation.

28 The **method** according to claim 27 wherein said electrical stimulation signal is generated by an electrical stimulator...

...or more separate units to each said unit serving a different stimulus modality.

29 The **method** according to claim 27 wherein said electrical stimulation signal is generated by an electrical stimulator...

...said unit is located at and provides stimulus for a different body location. 30 The **method** according to claim 27 wherein said acoustic stimulation signal is generated by an acoustic stimulator...
...more separate units wherein each said unit serves a different stimulus modality. 31. The **method** according to claim 27 wherein said acoustic stimulator signal is generated by an acoustic stimulator...

...is located at and provides stimulus for a different body I O location.

32 The **method** according to claim 27 further comprising the step of conditioning electrical signals representing acoustic stimulation activity, and processing conditioned electrical signals derived by acoustic stimulation.

33 The **method** according to claim 27 further comprising the step of monitoring both neuromuscular transmission monitoring and somatosensory evoked potential.
by means of a single electrical stimulation generator circuit

34 The **method** according to claim 27 further comprising the step of monitoring both **NMT** and SEP signals by means of a pair of electrodes.

35 The **method** according to claim 27 further comprising the step of providing a stimulator device adapted to...
...a neuromuscular transmission monitoring device only when not connected to said EEG module.

36 The **method** according to claim 27 further comprising the step of sending trigger information through a digital...
...potential stimulator to an EEG device for synchronization with a spontaneous EEG signal.

37 The **method** according to claim 27 further comprising the step of transmitting a combined time-of-occurrence...
...sites when triggering an EEG device by means of a single trigger line.

38 The **method** according to claim 27 further comprising the step of eliciting SEP or **NMT** signals either independently or simultaneously by means of a single pair of stimulator probes.

39 The **method** according to claim 27 further comprising the step of monitoring muscle and neurological electrical activity of...

35/3,K/52 (Item 52 from file: 349)
DIALOG(R) File 349:PCT FULLTEXT
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00381581 **Image available**

PSYCHOTHERAPY APPARATUS AND METHOD FOR AFFECTING PATIENT RESPONSE
PATTERNS

DISPOSITIF ET PROCEDE DE PSYCHOTHERAPIE POUR AFFECTER LES REACTIONS DU
PATIENT

Patent Applicant/Assignee:

WEATHERS Lawrence R,

Inventor(s):

WEATHERS Lawrence R,

Patent and Priority Information (Country, Number, Date):

Patent: WO 9722324 A1 19970626

Application: WO 96US19971 19961218 (PCT/WO US9619971)

Priority Application: US 95574196 19951218

Designated States: CA JP AT BE CH DE DK ES FI FR GB GR IE IT LU MC NL PT SE

Publication Language: English

Fulltext Word Count: 7849

PSYCHOTHERAPY APPARATUS AND METHOD FOR AFFECTING PATIENT RESPONSE
PATTERNS

DISPOSITIF ET PROCEDE DE PSYCHOTHERAPIE POUR AFFECTER LES REACTIONS DU
PATIENT

Fulltext Availability:

Detailed Description

Claims

English Abstract

A **psychotherapy** apparatus and **method** for inputting and shaping new emotional, physiological and cognitive response patterns in a patient includes...

...the patient to control temperature of the patient's hypothalamus, and a computer-implemented expert **system** for coordinating and timing the occurrence of stimuli and controlling air flow temperature so as...

French Abstract

L'invention concerne un dispositif et un procede de **psychotherapie** permettant de creer et de moduler de nouvelles reactions emotionnelles, physiologiques et cognitives chez un...

...lui, ce qui permet de controler la temperature de l'hypothalamus du patient, et un **systeme** expert informatique pour coordonner et echelonner l'apparition des stimuli, et aussi pour reguler la...

Detailed Description

Description

PSYCHOTHERAPY APPARATUS AND METHOD FOR
AFFECTING PATIENT RESPONSE PATTERNS

Technical Field

The present invention generally relates to

psychotherapy techniques and, more particularly, to **psychotherapy** apparatus and **method** for inputting and shaping new emotional, physiological and cognitive response patterns in a patient through...

...experience with a
historical or more recent negative experience.

Historically, the primary mode of conducting **psychotherapy** for treatment of these problems has been by the use of one **therapist** with one **patient** or one or more **therapists** with a small group of **patients**. This 30 mode of **psychotherapy** has been carried out mainly through verbal communication between **therapists** and **patients**. A significant drawback of relying primarily on verbal communication to conduct **psychotherapy** is that a large number of treatment sessions are needed to adequately deal with these...

...profit from verbal therapies. Also, many problems, through learned, do not respond well to verbal **psychotherapy**.

These include problems such as asthma, allergies, chronic pain syndrome, attention deficit disorder, etc.

As a consequence, a need was recognized by the inventor **psychologist** herein for a different approach to **psychotherapy** for treatment of emotional problems and emotionally-aggravated physical problems which approach will overcome the...

...drawbacks without introducing new ones in their place. This need was substantially fulfilled by the **psychotherapy** apparatus and **method** of U.S. Pat. No. 5,219,322 which issued to the inventor herein on June 15, 1993. The goal of the patented **psychotherapy** apparatus and **method** was to provide treatment of an undesirable emotional arousal of a patient through coordinated and...a desired behavior.

Continuing efforts made by the inventor herein with respect to the patented **psychotherapy** approach has led to the realization that by controlling and incorporating additional sources of stimulation...

...disclosed in the above-cited patent, the purpose and scope of applications of the patented **psychotherapy** approach can be substantially expanded beyond merely the elimination of undesirable emotional response.

Disclosure of Invention

The present invention provides a **psychotherapy** apparatus and **method** for inputting and shaping new emotional and cognitive response patterns in a patient.

The **psychotherapy** apparatus and **method** of the present invention achieves its expanded purpose and scope by combining and utilizing a...

...and cognitive response patterns in the patient.

Accordingly, the present invention is directed to a **psychotherapy** apparatus for inputting and shaping new emotional, physiological and cognitive response patterns

in a patient. The **psychotherapy** apparatus basically comprises: means for isolating a patient from external stimuli; means for generating and...

...to and inhaled by the patient to assist in the shaping of the new emotional, **psychological** and cognitive response patterns in the patient.

More particularly, the patient isolating means includes an...and cooled heat exchangers for receiving the flow of air generated by the fan.

The **psychotherapy** apparatus also comprises: means for actuating extensor and flexor muscles of the patient concurrently with...

...the patient.

Furthermore, the stimuli occurrence coordinating and timing means includes an computer-implemented expert **system** which is employed to **interview** the patient and an **interviewer** of the patient and to evaluate the patient and develop a detailed treatment program to guide and track the patient's treatment. Also, the expert **system** is electrically connected to the visual and auditory stimuli generating and presenting means, air flow...end of the air flow delivering means.

Further, the present invention is directed to a **psychotherapy method** for inputting and shaping new emotional, physiological and cognitive response patterns in a patient. The **psychotherapy method** basically comprises the steps of: isolating a patient from external stimuli; presenting visual and auditory...

...to and inhaled by the patient to assist in the shaping of the new emotional, **psychological** and cognitive response patterns in the patient, Further, the **psychotherapy method** comprises the steps of: actuating extensor and flexor muscles of the patient concurrently with the...

...patient to the stimuli, Also, the coordinating and timing includes operating a computer-implemented expert **system** to **interview** the patient and an **interviewer** of the patient and to evaluate the patient and develop a detailed treatment program to...

...coordinating and timing also includes controlling in a desired predetermined coordinated fashion via the expert **system**, as determined by the treatment program of the patient, the presenting visual and auditory stimuli...drawings in which.

Fig. 1 is a diagrammatic view of a preferred embodiment of a **psychotherapy** apparatus of the present invention.

Fig. 2 is an exploded diagrammatic view of a

platform...

- ...data about the patient, a remote control station for each patient, a computer implemented expert **system** for controlling operation of each remote control station via the coordination of a master control station connected between the expert **system** and each remote control station, Best Mode for Carrying Out the Invention Overall, the **psychotherapy** apparatus of the present invention utilizes a plurality of separate, but functionally related, components which...
 - ...physiological and cognitive response patterns in the patient P. The complexity of the patient treatment **procedures** makes it imperative that the **psychotherapy** apparatus 10 utilize a computer-implemented expert **system**. The expert **system** orchestrates all of the components of the apparatus that generate audio sources, light patterns, auditory **questions**, aromas, visual displays and that monitor and feedback patient physiological data. Thus, the expert **system** controls all aspects of the patient treatment and responds to a treatment protocol based on an assessment of the individual patient (which is also done by the expert **system**), More particularly, the expert **system** is employed to **interview** the patient and a human **interviewer** of the patient and to evaluate the patient and develop a detailed treatment program to...
 - ...to update the treatment plan, The treatment plan will be an assemblage of stepwise treatment **procedures**, selected from a library of such protocols, to address each of the problems that have...
 - ...through each treatment protocol that composes their treatment plan, Progress will be tracked by expert **system** analysis of the physiological monitors attached to the patient, by recorded **questions** that are asked of the patient and responded to by the patient's pressing buttons, as well as periodic reassessment by the computerized **interview system** and the human **interviewer**.
- Referring to the drawings and particularly to Fig.
- there is illustrated a preferred embodiment of the **psychotherapy** apparatus of the present invention, generally designated 10, for carrying out these patient treatment **procedures** in accordance with a preferred embodiment of a **psychotherapy method** of the present invention. The **psychotherapy** apparatus 10 basically includes means 12 for isolating the patient P from external stimuli, means...
- ...thereby control the temperature of the patient's hypothalamus. Referring also to Fig. 5, the **psychotherapy** apparatus 10 also basically includes means 22 for coordinating and timing the occurrence of the...

...described later on, being delivered to the patient P.

In a practical implementation of the **psychotherapy** apparatus 10 as diagrammatically depicted in Figs. 1 and 2, the patient isolating means 12...and therapeutic,

The visual and auditory stimuli generating and presenting means 14, 16 of the **psychotherapy** apparatus 10 of the present invention is similar to that used in the apparatus disclosed...25 hypothalamus is cooled by its arterial blood supply, via

a rather complicated heat exchanger **process**, Briefly stated, as a person inhales through the nose, venous blood in the nasal membrane...

...lets the evaporatively cooled venous blood cool the arterial blood it surrounds. Conveniently, this whole **process** happens just before the arterial blood enters the hypothalamus. The temperature of the hypothalamus is...room

10 and does not affect patient treatment,

Referring to Figs, 1 and 4. the **psychotherapy** apparatus 10 preferably also includes means 66 for delivering different selected aromas into the flow...

...air delivered to the patient P. The olfactory bulb goes 15 directly into the limbic **system** of the brain. The limbic **system** is primarily concerned with emotions, So,, aromas are very powerful stimulators of emotions. The aroma...

...unique prior experience. Other responses are based on inherited "domain specific" patterns.

Still further, the **psychotherapy** apparatus 10 also includes means 72 for actuating extensor and flexor muscles of the patient...would measure spontaneous 35 movement of the push-pull bar 72 in response to changing **psychological** and physical states. This allows assessment of the patient's evaluation of these states.

Referring to Fig. 5, the **psychotherapy** apparatus 10 also includes monitoring means 74, preferably although 5 not exclusively in the form...

...control station 78 connected to each remote control station 76, and a computer-implemented expert **system** 80 for controlling operation of each remote ...76 via the coordination of the master control station 78
5 connected between the expert **system** 80 and each remote control station 76. In the present embodiment, there can be up to sixteen remote control stations 76 serviced by one expert **system** 80 through one master control station 78.

The expert **system** 80 preferably includes two computer-implemented subsystems, The first subsystem is a pattern recognition/classifier...

...subsystem, the rule based expert type.

As seen in Fig. 5, the computer-implemented expert **system** 80 is electronically connected to the various different stimuli generating means and patient data monitoring...

...70 of the aroma delivery means 66, and the muscle actuating means 72. The expert **system** 80 causes the operation of such various multiple 35 stimuli means in a desired predetermined coordinated fashion as determined by the patient's treatment program.

More particularly, the expert **system** 80 basically operates in accordance with the following steps.

First: A human **therapist** interviews the **patient**,
Second: The expert **system** interviews the **patient** and also interviews the **therapist** about the **patient**,
Third: The expert **system** then combines data from the **interviews** and develops a patient problem list based on the **interviews**.

Fourth: The expert **system** selects a set of treatment protocols from a protocol library residing in the computer in which the expert **system** also resides. These selected protocols will address the elements of the various problems in the...

...a problem from the problem list to work on in the current session. The expert **system** selects the particular treatment protocol which correspond to the problem selected by the patient.

Sixth: The expert **system** administers the treatment in accordance with the rules of the selected protocol(s) by causingolfactory, kinesthetic, and aromatic stimuli.

Seventh: The expert **system** monitors patient data via patient button responses to digitized and operator speech presented **questions** and physiological measures (which responses as they are received by the 5 expert **system** are classified by the expert **system** into meaningful categories). Patient data is composed of patient physiological measures (electroencephalogram, electromyogram, Galvanic Skin...

...responses such as pushing or pulling on the bar and verbal responses.

Eighth: The expert **system** adjusts the generation of the stimuli in response to patient data and also according to...

...may include moving to the next problem on the patient problem list.

Ninth: The expert **system** stores patient problem list progress and an "audit trail" of the treatment and responses at...

...left
off.

Tenth: Subsequent sessions typically begin with the fifth step, Every few sessions the **procedure** is restarted at the First step, From the above-described steps, it can be understood that the expert **system** 80 controls all facets of a **patient**'s treatment, from **interviewing** each **patient** and also the **therapist** of the **patient** through evaluating the **patient** and developing a detailed treatment program to administering the treatment program and tracking the patient...

...periodically to update the treatment plan.

The treatment plan is an assemblage of stepwise treatment **procedures**, selected from a library of such protocols, to address each of the problems that have...

...control
all of the variables the apparatus 10 is capable of.

(1) digitized speech for **questions** and instructions; (2) changing light and sound patterns; (3) switching different sources of sound such...the coordinating and timing of the occurrence of stimuli includes operating the computer-implemented expert **system** to **interview** the patient and a human **interviewer** of the patient and to evaluate the patient and develop a detailed treatment program to...

...the coordinating and timing includes controlling in a desired predetermined coordinated fashion via the expert **system**, as determined by the treatment program of the patient, the presenting visual and auditory stimuli...

...means as well as with injection of aromas by using the aroma delivering means. These **procedures** can be performed on the patient with the patient outside of the state of consciousness...

...by super or subliminal speech or music. The patient is much more responsive to these **procedures** because of the dream-like state induced by the moving lights and sound. The individual patient's responsiveness to different variations in these **procedures** can be tracked by the physiological monitoring. This will allow the expert **system** to learn what is effective for the individual patient and respond accordingly. It is thought...

Claim

A **psychotherapy** apparatus for inputting and shaping new emotional, **psychological** and cognitive response patterns in a patient, said apparatus comprising:

(a) means for isolating a...

...to and inhaled by the patient to assist in the shaping of the new emotional, **psychological** and cognitive response patterns in the patient,

2 The apparatus of claim 1 wherein said...data and for coordinating and timing the occurrence of

stimuli includes a computer-implemented expert **system** operable to **interview** the patient and an **interviewer** of the patient and to evaluate the patient and develop a detailed treatment program to guide and track the patient's treatment, said expert **system** also being connected to said visual and auditory stimuli generating and presenting means, air flow being connected in communication with said discharge side of said fan.

18 A **psychotherapy method** for inputting and shaping new emotional, physiological and cognitive response patterns in a patient, said **method** comprising the steps of:

(a) isolating a patient from external stimuli;
(b) presenting visual and...

...and

inhaled by the patient to assist in the shaping of the 20 new emotional, **psychological** and cognitive response patterns in the patient,

19 The **method** of claim 18 further comprising the step of:

(g) actuating extensor and flexor muscles of the patient concurrently with the receipt of other stimuli.

20 The **method** of claim 18 further comprising the step of:

(g) delivering different selected aromas into the flow of air being delivered to the patient.

21 The **method** of claim 18 wherein said receiving and responding to feedback of patient data and said coordinating and timing the occurrence of stimuli includes operating a computer-implemented expert **system** to **interview** the patient and an **interviewer** of the patient and to evaluate the patient and develop a detailed treatment program to guide and track the patient's treatment.

22 The **method** of claim 21 wherein said receiving and responding to feedback of patient data and said...

...occurrence of stimuli also includes controlling in a desired predetermined coordinated fashion via said expert **system**, as determined by said treatment program of the patient, said presenting visual and auditory stimuli...

...flow to the

patient to control the temperature of the patient's hypothalamus.

23 The **method** of claim 21 further comprising the steps of:

(g) actuating extensor and flexor muscles of...

...delivering different aromas into the flow of air being delivered to the patient,

24 The **method** of claim 23 wherein said receiving and responding to feedback of patient data and said...

...of stimuli also includes controlling in a desired predetermined fashion via said expert **system**, as determined by said treatment program of the patient, said presenting visual and auditory stimuli...

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MARKERS FOR USE IN SCREENING PATIENTS

MARQUEURS SERVANT A EFFECTUER DES DEPISTAGES SUR DES PATIENTS

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Detailed Description

Claims

English Abstract

A **method** and apparatus for screening patients for nervous **system dysfunction** including neurological capacity and **dysfunction** comprises producing a patient profile of actual functional activity of a brain of a patient...

French Abstract

...a un appareil servant a effectuer des depistages sur des patients atteints de dystonie du **systeme** nerveux. Ce procede consiste a obtenir un profil de l'activite fonctionnelle reelle du cerveau...

Detailed Description

... OF THE INVENTION

The present invention is directed to the screening of patients for nervous **system dysfunction** including neurological or **psychiatric** degenerative conditions.

Functional brain imaging by means of positron emission tomography (PET) and single photon...

...the present invention is to provide a marker for use in screening patients for nervous **system dysfunction**.

This object is achieved in accordance with the invention by the use of a marker...

...premature aging and neurological AIDS.

Another object of the present invention is to provide a **method** for screening patients for nervous **system**

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dysfunction .

This object is achieved in accordance with the present invention by a **method** comprising producing a patient profile of actual functional activity of a brain of a patient...

...activity at a plurality of sets of predetermined coordinates of a given brain geometry.

The **method** preferably comprises comparing the patient profile with a plurality of markers for different nervous **system dysfunctions** . In this way, the same scan can be used for screening for different nervous **system dysfunctions** and the inconvenience of putting a patient through multiple brain scans is eliminated.

The plurality of markers can be for nervous **system dysfunction** selected from Parkinson's disease, Alzheimer's

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disease, torsion dystonia, cerebellar degeneration, depression, premature...present invention is to provide an apparatus for determining the presence or severity of nervous **system dysfunction** in a patient. This object is achieved in accordance with the present invention by providing an apparatus including a memory storing at least one marker for a nervous **system dysfunction** comprising a profile of predetermined functional activity at a plurality of sets of predetermined coordinates of a given brain geometry. A pre- **processor** is receptive of data corresponding to functional activity of a brain of a patient for...

...corresponding to the plurality of sets of predetermined coordinates of the given brain geometry. A **processor** cross-correlates the patient profile with the at least one marker and a post- **processor** determines the presence or severity of a nervous **system dysfunction** as a function of the degree of covariance for the cross-correlation.

In accordance with...

...scanner for scanning the patient's brain to produce the data applied to the pre **processor** . The scanner preferably comprises one of a PET scanner, a SPECT scanner and a functional MRI scanner. The pre- **processor** preferably comprises a spatial filter for filtering the data and circuitry for performing a log transform on the filtered data.

The post- **processor** preferably comprises circuitry for rescaling the degree of covariance to produce a patient marker score...

...with a previously obtained patient marker score for the patient to determine severity of a **dysfunction** .

Further in accordance with the present invention, a plurality of markers are preferably stored in memory and

5

the **processor** cross-correlates the patient profile with

the plurality of markers. The plurality of markers preferably are for nervous **system dysfunctions** including Alzheimer's disease, torsion dystonia, cerebellar degeneration, Parkinson's disease, neurological AIDS, depression and...

...the present invention, the scanner can be disposed at a remote location from the pre **processor** and thus the apparatus further comprises data communication circuitry for transmitting data from the scanner to the pre- **processor** . The communication can be made by means of wire or wireless transmission, can be carried out by modem over telephone lines or by other networking **techniques** .

Another object of the present invention is to provide a **method** for determining the presence or severity of a nervous **system dysfunction** in a patient.

This object is achieved in accordance with the present invention by a **method** comprising providing at least one marker for a nervous **system dysfunction** comprising a profile of predetermined functional activity at a plurality of sets of predetermined coordinates...with the at least one marker and determining the presence or severity of a nervous **system dysfunction** as a function of the degree of covariance for the crosscorrelation.

In accordance with the present invention, the **method** further comprises scanning the patient's brain to produce data for the patient profile. The...

...transform on the filtered data.

The step of determining the presence or severity of the **dysfunction** preferably comprises rescaling the degree of covariance to produce a patient's score for the marker.

Preferably, the **method** compares the patient's score for the marker with the patient's previous score for that

7
marker to determine the progressive changes in the **dysfunction** over time.

in a preferred embodiment of the present invention, a plurality of markers are...

...with the plurality of markers so that a single scan can be used for various **dysfunctions** such as Alzheimer's disease, torsion dystonia, cerebellar degeneration, Parkinson's disease, neurological AIDS, depression and premature aging.

The **method** can preferably be carried out with the scanning performed remotely from the processing of the...

...the present invention, the step of determining the presence or severity of the given nervous **system dysfunction** is achieved by comparing the patient's score with a

distribution of patients' scores of a patient population having the given nervous **system dysfunction**, a distribution of patients' scores of a patient population having a different nervous **system dysfunction** and a distribution of patients' scores of a patient population
8
not having the given nervous **system dysfunction**.

The present invention embodies the realization that a pattern of regional brain metabolic activity could...

...as well as a gauge for assessing disease severity in these and related conditions. This **method** may also be used as a screen to determine whether a subject's brain function...for diagnosing and objectively rating disease severity and progression in a strictly automated fashion. The **method** and apparatus of the present invention involves the automated application
9
of a marker to...

...scans for the purpose of diagnosis without reliance upon direct user visualization of images.

The **method** and apparatus in accordance with the present invention is applicable to any functional imaging modality, including PET, SPECT and functional MRI.

Moreover, the **method** and apparatus can be used with any disease-related network in its analysis of individual...

...particular disease and as a means of age-appropriateness of brain function as a screening **technique** for the assessment of cognitive functioning in the elderly.

The present invention achieves the determination...

...The marker is able to extract diagnostic network information from functional brain images. Anatomical imaging **techniques**, such as magnetic resonance imaging (MRV and computer tomography (CT)), are restricted to showing gross...s disease using PET and SPECT modalities and for the assessment of the normal aging **process**.

12
The present invention is particularly useful in the diagnosis and assessment of neurodegenerative and **psychiatric** disorders. These conditions entail primarily Alzheimer's disease and related forms of dementia, as well...

...gauge the effects of normal aging on a case by case basis can afford neurologists, **psychiatrists** and geriatricians a valuable tool in determining whether a given individual is
13
performing according...

...differential diagnostic probability information on an automated basis, the invention has vast applicability in neurology, **psychiatry**, general medicine and geriatrics.

The brain data information from the PET and SPECT sources can...or during the course of a therapeutic intervention. This technology is useful for neurological and **psychiatric** degenerative illnesses of the brain.

In accordance with the invention, the diagnosis can be performed...

...DRAWINGS

Fig. 1 is a block diagram of the apparatus for screening patients for nervous **system dysfunction** in accordance with the present invention;

Fig. 2 is another embodiment of the apparatus of Fig. 1;

Fig. 3 is a flow chart of the **method** according to the present invention;

Fig. 3A is a flow chart showing details of Fig. 3;

Fig. 4 is a flow chart of an additional aspect of the **method** of the present invention;

Fig. 5 illustrates a region of a brain and the 16...

...101 of Fig. 3 is an array of data which is applied to a pre- **processor** 3 which produces a patient profile from the data in step 102.

Details of the production of the patient profile carried out in pre- **processor** 3, are set forth in the steps of Fig. 3A. As shown therein, the data...resized and reoriented in step 102a to correspond to a given brain geometry (stereotaxic coordinate **system**) that has been selected for the purpose of this invention.

The given brain geometry discussed hereinafter, has been defined using the Talairach atlas coordinates. other standardized brain atlas coordinate **systems** could also be used to define a given brain geometry within the scope of the...

...to be minimized such that all brain slices can be placed in a common coordinate **system**. The spatial filter can be a Gaussian filter or another type of low pass filter...

...Thus the resulting array will have 1/27 the number of pixel values.

The pre- **processor** 3 also performs a log transform on the data in step 102c so as to...

...equally) from an individual's brain scan.

In step 103, the output of the pre- **processor** 3 is then cross-correlated in cross-correlator 5 with at least

one stored marker...addition
to the production of patient scores, the likelihood of the
20
patient having the **dysfunction** being screened for can be
further determined in post- **processor** 6 by the steps set
forth in Fig. 4.

In that **procedure** , the patient scores are input in
step 110 and in step 111, other input variables...

...race, gender,
age, weight, and clinical and medication history. These
additional inputs allow the post- **processor** to normalize
the patient scores so that they can be compared to scores
of other...

...113 with data
distributions for the marker in an established population
known to have the **dysfunction** in **question** , patient
populations having different but closely related
conditions, and normal control populations. This database
is...

...upon the comparisons with all of the
distributions, the likelihood of a patient having the
dysfunction is determined, and a letter can be printed for
the doctor (step 114), which includes all of the
demographic data and the determined probability of
dysfunction . Another important feature of the present
invention is the ability to update the database with...

...step 115 so as to make
the distributions more accurate for future comparisons.

The pre- **processor** 3, cross-correlator 5 and post
processor 6, as described hereinabove, can be implemented
by a microprocessor such as an Intel 80X86...

...a
microcomputer workstation such as those made by HewlettPackard or Sun
Microsystems.

For example, the **system** of Fig. 2 can be used in
accordance with the **method** to carry out the **method** as
described. The functions of the pre- **processor** , post
processor and cross-correlator of Fig. 1 are carried out
by a CPU 10 of a...

...activity
of the brain in terms of glucose uptake. This data is
input into pre- **processor** 3. The pre- **processor** 3, which is
preferably constituted by ...and shapes of
different subjects' brains, each image slice is resized
and reoriented in pre- **processor** 3 so that it conforms to
a given brain geometry with individual pixels defined in
terms of a standardized three-dimensional coordinate
system , preferably the Talairach Atlas coordinates.

The resized array for the data of Table I is...

...data of Table II is also stored in memory

13.

The next step in the **process** is spatial filtering of the data in pre- **processor** 3. The results of the spatial filtering for the data of Table II is shown...

...13.

In the next step, the values of Table III are log transformed by pre- **processor** 3 into natural logarithmic values shown in Table IV. The log transformation would, of course...

...disease stored in memory 4 is defined in terms of the same Talairach Atlas coordinate **system**. In order to simplify the processing, the marker is defined in terms of a series...

...connects the anterior and posterior commissures, and is the standard reference line for stereotaxic coordinate **systems**
X, Ye are elliptical origin coordinates
R11 R2 are principal axes radii
Ang the acute...of local brain function, the regional weights that comprise the marker for any given nervous **system dysfunction** or for normal aging, can be somewhat different for PET, SPECT and functional MRI. The...

...the application of the marker to any new brain image, and permits a completely automated **method** of patient score calculation.

The result of the pixel-by-pixel multiplication of the two...

...the relevant marker values in Table VI. From this data which is input to post- **processor** 6, the covariance between the marker and the patient's profile is obtained, and this...

...a mean array acquired across a large sample of normal subjects.

Upon rescaling in post- **processor** 6, the score for the patient is The score is compared in post- **processor** 6 to known statistical distributions of the scores in established populations of normals and patients with the disease in **question** to determine the likelihood of the disease. As a result, the patient is calculated to...a patient's brain and use that same scan to screen for
28
different nervous **system dysfunctions**. This reduces the inconvenience to the patient.

The specific marker is defined as a table...

Claim

1 A marker for use in screening patients for

nervous **system dysfunction** , comprising: a profile of predetermined functional activity at a plurality of sets of predetermined coordinates...

...Alzheimer's disease, torsion dystonia, cerebellar degeneration, depression, premature aging and neurological AIDS.
B. A **method** for screening patients for nervous **system dysfunction** , comprising the steps of: producing a patient profile of actual functional activity of a brain...

...at a plurality of sets of predetermined coordinates of a given brain geometry.

9 The **method** according to claim 8, wherein the step of comparing comprises comparing the patient profile with a plurality of markers for different nervous **system**
42

dysfunctions .

10 The **method** according to claim 9, wherein the plurality of markers are for nervous **system dysfunctions** selected from Parkinson's disease, Alzheimer's disease, torsion dystonia, cerebellar degeneration, depression, premature aging and neurological AIDS.

11 The **method** according to claim 8, wherein the step of producing a patient profile comprises calculating numerical...

...to the plurality of sets of predetermined coordinates of the given brain geometry.

12 The **method** according to claim 11, wherein the step of calculating comprises producing a single numerical value...

...each region of interest.

13 An apparatus for determining the presence or severity of nervous **system dysfunction** in a patient, comprising: a memory storing at least one marker for a
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nervous **system dysfunction** comprising a profile of predetermined functional activity at a plurality of sets of predetermined coordinates of a given brain geometry; a **pre-processor** receptive of data corresponding to functional activity of a brain of a patient for producing...

...corresponding to the plurality of sets of predetermined coordinates of the given brain geometry; a **processor** for cross-correlating the patient profile with the at least one marker; and a post-**processor** for determining the presence or severity of a nervous **system dysfunction** as a function of the degree of covariance for the crosscorrelation.

14 The apparatus according...

...scanner for scanning the patient's brain to produce the data applied to the **pre-processor** .

15 The apparatus according to claim 14, wherein the scanner comprises one of a PET...
...and a functional MRI scanner.

44

. The apparatus according to claim 13, wherein the pre- **processor** comprises a spatial filter for filtering the data.

17 The apparatus according to claim 16, wherein the pre- **processor** further comprises a circuit for performing a log transform on the filtered data.

18 The apparatus according to claim 13, wherein the post- **processor** comprises circuitry for rescaling the degree of covariance to produce a patient marker score.

19 The apparatus according to claim 18, wherein the post- **processor** further comprises circuitry for comparing a patient marker score with a previous patient marker score for the patient to determine severity of a **dysfunction** .

20 The apparatus according to claim 13, comprising a plurality of markers stored in memory and wherein the **processor** cross-correlates the patient profile with the plurality of markers.

45

. The apparatus according to claim 20, wherein the plurality of markers are for nervous **system dysfunctions** selected from the group comprising Alzheimer's disease, torsion dystonia, cerebellar degeneration, Parkinson's disease...

...22 The apparatus according to claim 14, wherein the scanner is remote from the pre- **processor** and further comprising data communication circuitry for transmitting data from the scanner to the pre- **processor** .

23 A **method** for determining the presence or severity of nervous **system dysfunction** in a patient, comprising the steps of providing at least one marker for a nervous **system dysfunction** comprising a profile of predetermined functional activity at a plurality of sets of predetermined coordinates...

...with the at least one marker; and determining the presence or severity of a nervous **system dysfunction** as a function of the degree of covariance for the cross-correlation.

24 The **method** according to claim 23, further comprising scanning the patient's brain to produce data for producing the patient profile.

25 The **method** according to claim 24, wherein the scanning comprises one of PET scanning, SPECT scanning and functional MRI scanning.

26 The **method** according to claim 24, wherein the step of producing the patient profile comprises spatially

filtering the data.

27 The **method** according to claim 26, wherein the step of producing the patient profile further comprises performing a log transform on the filtered data.

28 The **method** according to claim 23, wherein the
47 step of determining the presence or severity of the **dysfunction** comprises rescaling the degree of covariance to produce a patient score for a marker.

29 The **method** according to claim 28, wherein the step of determining the presence or severity of the **dysfunction** further comprises comparing a patient score for a marker with a previous patient score for that marker for the patient.

30 The **method** according to claim 23, comprising providing a plurality of markers and wherein the steps of cross-correlating the patient profile comprises crosscorrelating with the plurality of markers.

31 The **method** according to claim 30, wherein the plurality of markers are for nervous **system dysfunctions** selected from the group comprising Alzheimer's disease, torsion aystonia, cerebellar degeneration, Parkinson's disease, neurological AIDS, depression and premature aging.

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The **method** according to claim 24, wherein the scanning is performed remotely from the production of the patient profile and further comprising for transmitting data from a scanner.

33 The **method** according to claim 28, wherein the step of determining the presence or severity of a given nervous **system dysfunction** further comprises comparing the patient score with a distribution of patient scores of a patient population having the given nervous **system dysfunction**, a distribution of patient scores of a patient population having a different nervous **system dysfunction** and a distribution of patient scores of a patient population not having the given nervous **system dysfunction**.

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35/3,K/57 (Item 57 from file: 349)
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00255913 **Image available**

METHOD AND APPARATUS FOR MEASURING PSYCHOTHERAPY OUTCOMES
PROCEDE ET APPAREIL DE MESURE DE RESULTAT DE PSYCHOTHERAPIE

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PROCEDE ET APPAREIL DE MESURE DE RESULTAT DE PSYCHOTHERAPIE

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Detailed Description

Claims

English Abstract

A **method** and apparatus for measuring a patient's **psychotherapy** progress is provided. Initial patient mental health is measured by administering a **questionnaire** measuring three **psychological** variables. The three **psychological** variable measures are combined into a mental health index (69). Following a number of sessions of **psychotherapy**, the patient's subsequent **psychological** condition is again measured using the three **psychological** variables. Patient session records (42) are stored in a large database (20). Patient progress can...

...the database (20), and patient improvement as a function of a number of sessions of **psychotherapy** can be determined. The **system** further provides a case manager with a measure of the effectiveness of continued **psychotherapy** sessions, and a basis of comparison of various **psychotherapy** providers.

French Abstract

Procede et appareil de mesure du progres **psychotherapeutique** d'un patient. On mesure la sante mentale initiale d'un patient en le soumettant a un **questionnaire** mesurant trois variables **psychologiques**. On combine les mesures des trois variables **psychologiques** pour obtenir un indice de sante mentale (69). Apres un certain nombre de seances de psychoterapie, on mesure a nouveau l'etat **psychologique** ulterieur du patient au moyen des trois variables **psychologiques**. Les bilans (42) des seances du patient sont conserves dans une grande base de donnees...

...Ainsi il est possible de comparer les progres du patient par rapport a un etat **psychologique** initial de celui-ci, des resultats de patients typiques stockes dans la base de donnees...

...ameliorations de l'etat du patient en fonction d'un certain nombre de seances de **psychotherapie**. Le **systeme** prevoit egalement un gestionnaire de cas comportant une mesure de l'efficacite de seances de

psychotherapie continue, et une base de comparaison des divers psychotherapeutes .

Detailed Description

ETHOD AND APPARATUS FOR
MEASURING PSYCHOTHERAPY OUTCOMES

Background Of The Invention

This invention relates to **psychotherapy** . More particularly, this invention relates to a **system** for measuring and quantifying a patient's **psychological** condition and the progressf stasis , or retrogression thereof, and for administering pyschotherapy based on such...

...have increased absenteeism.

Moreover, the families of such employees typically use the general health care **system** at an increased rate.

Mental health care may be characterized by two characteristic's of...

...health care have been difficult if not impossible to measure. Accordingly, efforts to improve the **system** for delivering mental health care have focused on cost, the only measured variable in the **system** . Since the cost parameter can be measured, **systems** which minimize cost tend to be rewarded without regard to the unknown effect of cost...

...or to terminate care as early as possible. However, without a reasonably accurate and objective **method** of evaluating cases, a case manager or other interested person is unable to rationally allocate the limited resources for **psychotherapy** among those who demand it. For instance, extensive resources may be allocated to patients who...

...denied to patients who would show substantial improvement with limited treatment. Moreover, without such a **method** the case manager or other interested person cannot rationally determine which providers should be engaged...

...treatment in an individual case or on an overall basis.

Lacking an ability to measure **psychotherapy** outcomesr efforts to select a provider and a course of therapy have focused on **process** measures, i.e. measures which attempt to infer the effect of therapy from characteristics of the therapy **process** such as the credentials of the provider.

Too often the therapy approved and provided to...It is therefore a general object of the invention to provide an objective and reliable **method** and apparatus (" **system** ") for measuring the **psychological** condition of a person.

it is a further object of the invention to provide a **system** for measuring the outcome of **psychotherapy** , i.e. its effect upon the **psychological**

condition of a person.

It is a further object of the invention to provide a **system** for administering **psychotherapy** using measurements of **psychological** condition to initially determine, and as feedback to monitor and control, the course of **psychotherapy** provided to a person.

It is a further object of the invention to provide a **system** for evaluating the relative effectiveness of **psychotherapy** providers.

The present invention provides an apparatus and a **method** for measuring a patient's **psychological** condition and changes therein. The **method** preferably provides a single number indicative of a person's overall **psychological** condition, as well as single numbers indicative of a person's **psychological** condition with respect to each **psychological** variable involved in the measurement. The invention further includes various **methods** of administering **psychotherapy** based on such measurements.

One such **method** is for feedback control of providing **psychotherapy** to a patient and includes the steps of measuring the patient's initial **psychological** condition with respect one or more **psychological** variables, and preferably three specific variables; administering a dose of **psychotherapy**; measuring the patient's subsequent **psychological** condition with respect to the measured **psychological** variables; and comparing the subsequent measurement with the initial measurement to determine the patient's progress. These steps may be repeated, using measured information to appropriately modify the **psychotherapy** provided in subsequent doses, until measurements indicate that further **psychotherapy** is not needed because the patient's **psychological** condition is acceptable or that further **psychotherapy** is unjustifiable because significant improvement is not expected or the expected benefit of further treatment cannot be justified by its expected cost.

Another such **method** is to evaluate the relative effectiveness of **psychotherapy** providers, including individual therapists and/or organizations which provide or pay for **psychotherapy** services*. In accordance with this **method**, the effectiveness of such providers may be determined based upon measurements of the **psychological** condition of the patients to whom they provide **psychotherapy**. For instance, improvement of **psychological** condition per dose of **psychotherapy** may be computed as a figure of merit indicating effectiveness.

In accordance with the invention, measurement of **psychological** condition is based upon tests. Preferably, such tests are administered to a patient by obtaining responses to a set of standardized **questions**. It is particularly preferred to obtain self-reporting responses of the patient as well as...

...of the patient.

The apparatus of the invention provides means for recording responses to a **psychological** test,, preferably the patient's self-reported responses as well as a clinician's professional evaluation; a **processor** for calculating measures of the patient's **psychological** condition with respect to one or more **psychological** variables from the recorded responses, and preferably also for calculating a single-valued mental health index and clinical assessment index derived from the measured **psychological** variables; means for storing **psychotherapy** session records for a number of **psychotherapy** sessions, and preferably also for storing benchmark measures of the **psychological** variables; and means for determining a particular patient's progress by comparing measurements of the patient's **psychological** condition taken at different times. Preferably the apparatus includes a database of responses recorded with...

...which may be stored
in the apparatus;

Figure 3 is a flow diagram illustrating a **method** of establishing benchmark values for measured **psychological** variables;

Figure 4 is a dose-response graph for certain **psychological** variables;

Figure 5 is a dose-response graph for a composite mental health index computed...

...typical courses

a mental illness may take;

Figure 7 is a flow diagram illustrating a **method** for administering **psychotherapy** utilizing measurements obtained in accordance with the invention;

Figure 8 is another dose-response graph...

...is a listing of the example patient's 20 percentile ranking with respect to certain **psychological** variables;

Figure 12 is a flow diagram of a **method** of allocating **psychotherapy** resources among patients;

Figure 13 is a flow diagram of a **method** of allocating **psychotherapy** resources among providers; and

Figure 14 is a block diagram of a network in accordance with the invention.

Detailed Description Of The Invention

The present invention provides an apparatus and **method** for providing standardized replicable measurements of **psychological** condition and **psychotherapy** outcomes for patients. The **system** quantifies **psychological** condition and progress, stasis or retrogression thereof by means of a **psychological** test which determines a person's condition with respect to one or more **psychological** variables. Test results for individuals are collected and stored in a computer database. As the...

...of various therapy providers. The data are combined using algorithms to create numerical measures of

psychological condition and the outcome of treatment, Measurements taken at the outset and at successive intervals during **psychotherapy** provide finite measures of the patient's ability to deal with problems, both perceived and...
...changes therein due to therapy.

In accordance with the preferred embodiment of the invention, the **psychological** test of a patient includes self-reported responses of a patient to a standard patient **questionnaire** as well as a clinician's professional evaluation of the patient provided in response to a standard clinician **questionnaire**. Further in accordance with the preferred embodiment, the test provides responses indicative of the patient's condition with respect to a plurality of **psychological** variables. Such variables desirably include one or more of the following.

subjective well-being; symptomatic distress; current life functioning; self-esteem; coping; temperament; and attitude. Applicant prefers to measure **psychological** condition with respect to three of these **psychological** variables: subjective well-being, symptomatic distress, and current life functioning. Subjective well-being is a...

...conception of contentment.
Subjective well-being includes dimensions of distress, energy and health, emotional and **psychological** adjustment, and current life satisfaction. Symptomatic distress includes the **psychological** diagnoses of adjustment disorder, anxiety, bipolar disorder, depression, obsessive-compulsive disorder, phobia, and substance use...

...functioning, health and grooming, intimate relationships, self-management, social relationships, and Patient responses to a **questionnaire** are used to assess the **psychological** variables for each patient.

Applicant's presently preferred **questionnaire** is included in Appendix A to this application, "Outpatient Therapy Effectiveness Tracking **System**", and includes 11 **questions** directed to subjective well-being, 40 **questions** directed to symptomatic distress, and 24 **questions** directed to 5 current life functioning, as well as, **questions** directed to other areas. An analysis of this **questionnaire** is provided in Appendix B to this application, "The Howard Outpatient Tracking **System**". The **questionnaire** may be administered in the form of a test booklet, with the answers recorded on...

...prefers to obtain a clinician's professional evaluation of a patient with respect to two **psychological** variables: a global assessment of psychopathology and an assessment of the patient's current life...94/04072 PCT/US93/07969
is included in Appendix A, and an analysis of the **questionnaire** is included in Appendix B.

While the **questionnaires** set forth and described in Appendices A and B are presently preferred, other

questionnaires suitable for use in the invention may already exist or may be devised.

Responses to the **questionnaires**, whether by the patient or the clinician, are used to compute single valued quantities as **psychological** measures of the patient. Patient responses may be used to compute scaled scores with respect to each measured variable as **psychological** measures. They may also be used to compute as a **psychological** measure a single number indicative of the patient's overall **psychological** condition, which Applicant refers to as a "mental health index" or MHI.

Likewise, the clinician...

...each variable evaluated as well as a single-valued "clinical assessment index" or CAI as **psychological** measures.

Figure 1 shows an exemplary embodiment of an apparatus for practicing the present invention...

...input patient related data, preferably data from both patient and clinician responses from their respective **questionnaires** to a memory 40 by means of a **processor** 20. Memory 40 includes patient session records 42, preferably structured as a database; algorithms 43 for computations including computations of **psychological** condition with respect to the raw data, and preferably PCT/US93/07969 also data representing...

...pertains;
patient demographic data 61 such as age, gender, and education; presentation problem data 62; **patient** expectation data 63; **therapist** code 64 identifying the **therapist**; session number code 65 indicating the number of sessions that the patient has attended; well...

...The records in the database also desirably include a field for data 73 representing the **patient**'s perception of the **therapist** and the **patient** - **therapist** relationship.

With respect to the preferred **questionnaires** of ...A. the patient demographic data 61 may be derived from responses to the Personal Information **questions**; the presentation problem data 62 may be derived from responses to the Presenting Problems **questions**; the patient expectation data 63 may be derived from responses to the Treatment Needs and Expectations **questions**; the current well-being measure 66 may be derived from responses to the 5 Current Well-Being **questions**; the symptomatic distress measure 67 may be derived from the Current Symptoms **questions**; the current life functioning measure 68 may be derived from responses to the Current Life Functioning **questions**; the clinician data 71 and 72 may be derived from responses recorded on the Clinician Form; and data 73 representing the **patient**'s rating of the **therapist** may be derived from responses to the **Therapist** Ratings **questions**.

The data in the **patient** records 42 may be organized in a variety of fashions. For instance, instead of single...

...accordance with such data organization, and as illustrated in Appendix A, 25. separate sets of **questionnaires** may be provided for initial or intake data and for data obtained during the course of therapy.

Several options are available for storing data relating to **psychological** condition. Regarding the patient-reported data the raw data from the patient responses to the well being, symptomatic distress, and current life functioning **questions** may be stored; and/or **psychological** measures comprising single valued quantities representing the patient's condition with respect to each such...

...single-valued quantities if the computation algorithms are changed, for instance upon revision of the **questionnaires** ; while Applicant prefers to store computed **psychological** measures, whether or not the computed quantities are stored will depend on the use@r...

...needed; the same is true for the composite mental health index and clinical assessment index **psychological** measures.

The apparatus of Figure 1 also includes an output means 50t which can be...suitable input means instead of or in addition to the preferred optical scanner input device.

Processor 20 operates on data relating to a test of a patient which has been input...

...with algorithms 43 to produce single valued computed quantities with respect to each of the **psychological** variables tested and overall indices of mental health and **clinical** assessment. Such **algorithms** will generally include scaling and weighting steps, to combine responses to individual **questions** into an appropriately scaled score as a **psychological** measure with respect to the relevant individuals variables and the overall indices. The scaling and weighting functions employed will be dependent on the relative importance and reliability of the **questions** involved. Since the scaling and weighting functions are entirely dependent on the particular **questionnaires** used, they cannot be specified in general terms.

With a suitable **questionnaire** and means for operating on the responses, it becomes possible to provide means for reliably measuring a person's **psychological** condition and changes therein. Figure 3 is a flow chart illustrating a **process** which is of substantial value in such measurements. The **process** of Figure 3 establishes objective benchmark values against which test results for individual patients may...

...both patient and clinician responses and responses are recorded in step 102. In step 104, **psychological** measures are computed and stored based on the test results recorded in step 102. These 5 **psychological** measures may be patient condition with respect to individual **psychological** variables and/or overall **psychological** indices, as previously described.

In step 106, benchmarks are computed with respect to the computed **psychological** measures. Such benchmarks are 10 values bearing a predetermined statistical relationship to the data set representing the **psychological** measures for groups of patient data in the database. Thus, the **process** is repeated by returning to step 102 and obtaining additional test results preferably results for...

...increases. This provides objective and reliable self-validating benchmarks 20 from which inferences regarding individual **psychotherapy** cases may be drawn. For a given data set for a **psychological** measure, the benchmark may for example be established as a certain number of standard deviations a "mental health" population of persons seeking **psychotherapy**, a benchmark of normalcy for such a population may be established at a certain number...

...benchmark of normalcy with respect to the mental health index, clinical assessment index, and the **psychological** variables which comprise them.

One particularly useful output format for data derived from a large database of patient test is a "dose-response" graph or chart of **psychological** measure versus **psychotherapy** dose, as illustrated in Figures 4 and 5. In each graph the cumulative dose of **psychotherapy** is indicated on the X axis as the number of therapy sessions, and the mean percentiles for the **psychological** measures for data derived from the test of Appendix A is plotted on the Y...

...shows the mean percentiles for the subjective well-being, symptomatic distress, and current life functioning **psychological** variables, and Figure 4 shows the mean percentiles for mental health index, at intake and after 2, 4 and 17 **psychotherapy** sessions.

Such charts provide data indicating varying benchmarks for expected improvement in **psychological** condition as a result of **psychotherapy**. The "normal" benchmark of about the 84th percentile is also shown. **Psychological** measures for a particular patient-- may be plotted on such a graph and compared with...

...illness, by graphing a measure of functioning determined by testing verses time (or dose of **psychotherapy**). After an initial period 110, a patient will often appear to show a worsening of...

...the illness and effect of the therapy and use such information to control the therapy **process** , Thus, Figure 7 is a flow chart illustrating a **method** for feedback control of **psychotherapy** provided to a particular patient, which may be performed using the 25. **methods** and apparatus previously described. In step 130, intake measurements are made for the patient such as by administering the **questionnaire** of Exhibit A, recording responses, and computing measures such as ...indicate that the patient is sufficiently mentally healthy that therapy is not needed, and the **process** would terminate in step 140, If therapy is determined to be justified in 5 step...

...is devised in step 134 and implemented in step 136. After a course of therapy, **psychological** condition is again measured in step 138, and the **process** returns to step 132 for a determination at that time of whether further therapy is justified. The **process** continues with devising and applying further therapy and the step to monitor condition and progress...

...because it is unlikely to be successful and further therapy is therefore unjustifiable, Using this **method** , the treatment decisions made by a therapist, case manager, or party paying for the...
...diagram providing an easily-visualized presentation of a patient's condition and progress. A **psychological** measurer such as the mental health index, is computed for a patient based on tests taken at various times and plotted against **psychotherapy** dose, which as indicated may be the number of therapy sessions or their monetary cost...

...deviations above and below the mean, respectively.

Curves 154, 156t and 158 illustrate plots of **psychological** measures computed for patients AF B, and C.

respectively. In the **method** of Figure 7f measurements in step 138 of patient B indicate that therapy is ...in step 134 the further therapy devised would be a continuation of the previously-successful **method** , Measurements of patient C in step 138 indicate that

oz /
PAGE MISSING UPON FILING
my...

...she had some family therapy and six years ago she had six months of individual **psychotherapy** .

The intake diagnosis was: Dysthymia.

Figure 9 is a bar graph showing the percentile scores...

...the patient based on tests administered at various times over a 98 session course of **psychotherapy** , Figure 11 is a listing of the patient's percentile rank

with respect to the...

...and at
session 77 of therapy. Such figures may be produced as
outputs of a **system** in accordance with the invention,
o2@ I
PAGE MISSING UPON FILING
B, then A. Therapy...

...in database
5 40 of Figure 1.

Figure 13 is a flow diagram of a **method** of
allocating resources supporting therapy among various
providers. In steps 180-184r the test-therapy other resource
allocation **methods** may be employed based upon such data.

While the apparatus shown in Figure 1 may be
configured as a stand-alone **system**, it is believed that
the invention may have greatest utility when the elements
in the...

...more accurate
benchmarks to be computed. Information necessary for each
node to carry out the **methods** of the invention with
respect to the local data input at a node is communicated...

...In this wayr each node 194 can input
its own data and compute its own **psychological** measures
without the necessity of obtaining large amounts of data
and maintaining it resident at...
...from the scope and
spirit of the invention.

- @v
APPENDIX "A"
OUTPATIENT THERAPY EFFECTIVENESS
TRACKING **SYSTEM**
Kenneth L Howard, Ph.D.

Northwestern University
Peter L. Brill, M.D.

Intecrra@, Inc.

Robert...THIS.'i.SECUON.IF YOU.@HAVE'COMPLETED..IT.'BEFORE,."";...-j
1. How much counseling or **psychotherapy** have you had in the past?
0 None T Three to seven months
a Less...

...One to three months
2. How important to you is it to enter counseling or **psychotherapy**
at this time?
(D It is absolutely essential to me.

Q It is very important...

...all.

3. How difficult is it goin2 to be for you to be in counselingJ

psychotherapy (in terms of effort, cost, lost job time, transportation, other people's opinions, etc.)? (D...

...extremely difficult.

0) It will be impossible.

4. How confident are you that counseling or **psychotherapy** will be successful in helping you with your problem(s)?
(D Not at all confident...

...C4) Very confident.

5. What is your best guess as to how long counseling or **psychotherapy** will last?
(D 1-3 weeks (D 1-2 years
0 4-8 weeks 6...

...YOU@'HAVE...'COMPL .M-"fi: !btF0kt
C041VIPLEM7
-7: - !:7...

6. When you finish counseling or **psychotherapy**, how well do you feel that you will be
Dettina alongr emotionally and **psychologically** ?
I WILL BE GETTING ALONG.

(D Quite poorly; I will be barely able to manage...rate the extent to which each of these problems is a reason for your seeking **psychotherapy** now by filling in the circle of the appropriate response for each problem.

I AM SEEKING **PSYCHOTHERAPY** BECAUSE OF.

Not At Some Very
AU Much

1. Problems with my spouse or romantic...present time, how much do you feel you have benefitted from this counselin.g or **psychotherapy** ? (Not Applicable if this is yourfirst session with this therapist.) I WOULD RATE MYSELF AS...

...Rights Reserved.

CURRENT LIFE FUNCTIONING

Below are some ways in which people's emotional or **psychological** problems interfere with their functionino. Please read each item carefully and fill in the circle...

...corresponds to the response that best describes your present situation.
Please use the following radng **system** .

0 = Not applicable

T = Not at aU

= A little bit

6) = Moderately

(D = Quite a bit

6 = Extremely

MY EMOTIONAL/ **PSYCHOLOGICAL** PROBLEMS INTERFERE WITH MY.

Not Not

applicable at all Moderately Extremely

1. Ability to perform...OFTEN YOU HAVE HAD EACH EXPERIENCE LN THE PAST MONTH, Please use the followina rating **system** .

0 Not Al M

(D Once or Twice

(Z Several Times

0 Often

@ Most of...OFTEN YOU HAVE HAD EACH EXPERIENCE IN THE PAST NIONTH.

Please use the followina ratino **system** .

0 Not At All

(D Once or Twice

0 Several Times

0 Often

@ Most of...

...or dru2 use.

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CLINICIAN FORM

GENERAL INFORMATIO

PATIENT CODE

THERAPIST CODE

SESSION NUMBER

DATE.

TO BE COMP=D AFTER INITIAL SESSION ONLY

PATIENT EMPLOYER CODE...improvement.

4. Substantially more improvement.

4. How well is your patient getting along, emotionally and **psychologically** ? 1. Quite poorly; can barely manage to deal with things.

2. Fairly poorly; life is...

...much the way he/she would like to.

/@/z

APPEMIX "B"

The Howard Outpatient Tracking **System**

Kenneth L Howard, Ph.D.

Northwestern University

Robert J. Lueger, Ph.D.

Marquette University

Michael...

...Integra, Inc.

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The Howard Outpatient Tracking **System** consists of four **questionnaires**

: two Patient Forms and two Clinician Forms. These **questionnaires**

measure the patient's progress in Treatment based on the patient's perspective as well...

...the patient has returned to a normal functional status.

Much of the focus in these **questionnaires** centers on the patient's functioning in six life areas: family, health, intimacy, social, self...

...addition to those found in the Patient Treatment Form. One section consists of six demographic **questions** such as the patient's marital status, educational background, living situation, etc. Another section is an open-ended **question** asking the patient- to describe his/her reasons for seeking psychoth mpy. The third section...patients rate the extent to which each problem is a reason for his/her seeking **psychotherapy** . In the presenting problems section, there are at least three **questions** for each of the six life areas, which is consistent with our other materials. There...

...The four items in this section include dimensions of distress, energy and health, emotional and **psychological** adjustment, and current He satisfaction. This content sampling includes both positive and negative affect (Diener time, how well do you feel that you are getting along emotionally and
- **psychologically** ?
2. At the present time, how energetic and healthy have you been feeling?
3. At...

...patient is asked in this section to report to what degree his/her emotional and **psychological** problems are interfering with his/her life functioning. The 24 items in this scale can be categorized into the six life areas so that there are at least 3 **questions** per area. The family, intimacy, and social **questions** inquire about the patient's interactions with others and carrying out his/her responsibilities to...

...with him/herself.

CURRENT LIFE FUNCTIONING

(reliability = .91)

FAMILY FUNCTIONING: reliability =.75

6. My emotional/ **psychological** problems interfere with my interaction with my parents.

7. My emotional/ **psychological** problems interfere %with my interaction with my siblings.

10. My emotional/ **psychological** problems interfere with my carrying out family responsibilities.

HEALTH AND GROOMING: reliabilirv =.72

5. My emotional/ **psychological** pro6lems interfere with my ability to maintain my personal appearance.

11. My emotional/ **psychological** problems interfere with my participation in physical activities.

20. My emotional/psycholocrical problems interfere with my maintaining good health habits.

DITIMATE RELATIONSHIPS: reliability =.67

4. My emotional/ **psychological** problems interfere with my interactions with my spouse/romantic partner.

18. My emotional/ **psychological** problems interfere with my ability to

form or sustain intimate relationships.

19. My emotional/ **psychological** problems interfere with my enjoyment of sexual activities.

SELF-MANAGEMENTV reliability = .78

13. My emotional/ **psychological** problems interfere with my ability to function as an independent person.

15: My emotional/ **psychological** problems interfere with my ability to manage -my finances.

16. My emotional/ **psychological** problems interfere with my planning and enjoying leisure time activities.

17. My emotional/ **psychological** problems interfere with my being the kind of person I
SOCIAL RELATIONSHIPS: reliability = .82
2. My emotional/ **psychological** problems interfere with my interactions with friends.

Current Symptom Checklist. Many data collections use a...

...have devised a completely new symptom checklist. From clinical diagnoses based on 140 Structured Clinical Interviews for the DSM-M (SCM), we found that 74.3% of the patients had at as a patient self-report symptom checklist. There are at least three questions for each diagnosis; however, the more prevalent the diagnosis was in our original sample, the greater the number of questions pertainir@g to its area.

CURRENT S Ms

(reliability = .93)

ADJUSTMENT DISORDER: reliability = .77...

...the therapeutic bond (Orlinsky & Howard, 1987) which has three components.

Empathic resonance relates to the patient's perception that the therapist understands him/her, and mutual affirmation pertain to an open, caring regard between the patient and the therapist.

The Patient Treatment Form has nine items taken from the larger 50-item Therapeutic Bond Scale (Saunders...is not found in the Clinician Treatment Form. This section consists of an open-ended question asking the therapist to state the patient's reasons for seeking psychotherapy.

There is also a place in this section for the therapist to list the patient's diagnoses. Both forms contain one overall rating of the patient along with ratings in...this patient's level of [e.g., Family Functioning]." A preliminary inspection of ratings from therapists on a sample of patients indicated that ratings ranged across the available categories for all six domains. The intercorrelations of...Clinic.11
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(V@HOIDAS) with a miide to its use Geneva: World Health Orcranizad'on.

PCY/US93/07969 What Is Claimed Is.

J* A **method** for measuring the outcome of **psychotherapy** comprising the steps of.

a. measuring a patient's **psychological** condition with respect to at least one **psychological** variable;

b. administering a dose of **psychotherapy** ;

C, measuring the patient's subsequent

psychological condition with respect to previously measured **psychological** variables; and de comparing the patient's subsequently

measured **psychological** condition with the patient's previously measured **psychological** condition to determine the change therein, is 2* The **method** of claim 10, wherein the

psychological variables measured include one or more of subjective well being, symptomatic distress, current life functioning, self-esteem, coping, temperament, and attitude.

3e The **method** of claim 2r wherein the

psychological variables measured include subjective well being, symptomatic distress, and current life functioning.

4o The **method** of claim it wherein said

measuring steps include administering a **psychological**

test.

* The method of claim 4. wherein said psychological test administering step includes obtaining patient responses to a questionnaire.

6e The method of claim 5,,. further comprising the step of computing a mental health index based upon patient questionnaire responses.

7* The method of claim 4. wherein said psychological test administering step includes obtaining clinician responses to a questionnaire.

8a The method of claim 7. further comprising the step of computing a clinical assessment index based upon clinician questionnaire responses.

9* The method of claim 1, wherein steps b, c, and d are performed repeatedly.

10. The method of claim 1, further comprising the step of comparing the patient's measured psychological condition with benchmark values.

11, The method of claim 10, further comprising the steps of measuring the psychological condition of a plurality of persons and computing at least one benchmark value based upon such measurements,

12, The method of claim 11, wherein the benchmark value computing step includes computing a benchmark value of psychological normalcy,

. The method of claim 12F wherein said psychotherapy administering step b and said subsequent measuring step c are performed repetitively until the patient's measured psychological condition exceeds the benchmark value of psychological normalcy.

14. The method of claim 11, wherein the benchmark value computing step includes computing a benchmark psychotherapy dose-response value.

15. The method of claim 14, wherein steps b and 10 c are performed repetitively, further comprising the step of comparing the patient's measured psychotherapy dose response with a benchmark value of dose response.

16. A method of administering a program of psychotherapy comprising the steps of repetitively alternately administering a dose of psychotherapy to a patient and measuring the psychological condition of the patient for each patient in a group of patients; storing data representing the psychotherapy doses administered and the measurements of psychological condition; and computing changes in psychological condition per psychotherapy dose based upon the stored data.

17* A method according to claim 16, wherein the change in psychological condition per dose is computed for each patient in a group of patients.

PAGE MISSING...

...apparatus of claim 21 wherein the database comprises.
data corresponding to patient responses to a **questionnaire**; and
data corresponding to clinician responses to a **questionnaire**.

24, The apparatus of claim 22, wherein the 10 processing means further comprises means for...

...claim 24, wherein the processing means further comprises means for computing a benchmark value of **psychological** normalcy from the data in the database.

- 26. The apparatus of claim 25, wherein the processing means further comprises means for computing a benchmark **psychotherapy** dose-response value,

27, The apparatus of claim 26, wherein the processing means further comprises means for comparing the patient's measured **psychotherapy** dose response with a benchmark value of dose-response.

Claim

... 93);

original claims 1-27 replaced by amended claims 1-34 (8 pages)]

is A **method** for administering **psychotherapy** to a patient and measuring the outcome thereof comprising the steps of:

a. administering a **psychological** test to a patient and measuring the patient's **psychological** condition with respect to at least one **psychological** variable; and repeatedly be administering a dose of **psychotherapy** to the patient;
co administering the **psychological** test to the patient and measuring the patient's subsequent **psychological** condition with respect to said at least one previously measured **psychological** variable; and
de comparing the patient's subsequently measured **psychological** condition with the patient's previously measured **psychological** condition to determine the change therein, wherein said **psychotherapy** administering step includes determining a **process** of **psychotherapy** to be administered in accordance with the measured **psychological** condition of the patient and compu"ged changes therein, and administering psychothe:apy in accordance with said determined **processr** whereby the **psychotherapy** administration **process** is optimized by feedback control on the basis of **psychological** condition measurements.

* The **method** of claim 10, wherein the **psychological** variables measured include at least one of subjective well being, symptomatic distress, current life

functioning, self-esteem, coping, temperament, and attitude.

3e The **method** of claim 2o, wherein the **psychological** variables measured include subjective well being, symptomatic distress, and current life functioning.

4a The **method** of claim 1, wherein said 10- **psychological** test administering steps includes obtaining patient responses to a **questionnaire**.

5* The **method** of claim 4, further comprising the step of computing a mental health index based upon patient **questionnaire** responses.

6 The **method** of claim 1, wherein said **psychological** test administering steps includes obtaining clinician responses to a **questionnaire**.

7e The **method** of claim 6, further comprising the step of computing a clinical assessment index based upon clinician **questionnaire** responses.

8e The **method** of claim 1, further comprising the step of comparing the patient's measured **psychological** condition with benchmark values.

o The **method** of claim 8r further comprising the steps of measuring the **psychological** condition of a plurality of persons and computing at least one of said benchmark values based upon such measurements.

10 The **method** of claim 9, wherein the benchmark value computing step includes computing a benchmark value of **psychological** normalcy.

11 The **method** of claim 10, wherein said **psychotherapy** administering step b and said subsequent measuring step c are performed repetitively until the patient's measured **psychological** condition exceeds the benchmark value of **psychological** normalcy.

12 The **method** of claim 9, wherein the benchmark value computing step includes computing a benchmark **psychotherapy** dose-response value,

13 The **method** of claim 12, further comprising the step of comparing the patient's measured **psychotherapy** dose response with a benchmark value of dose response, wherein said **psychotherapy** administering step includes determining said **process** of **psychotherapy** to be administered in accordance with said dose response comparison.

14e A **method** of administering a program of **psychotherapy** comprising the steps of repetitively alternately administering a dose of **psychotherapy** to a patient and measuring the **psychological** condition of the patient for each patient in a group of patients; storing data representing the **psychotherapy** doses administered and the measurements of **psychological** condition; computing changes in **psychological** condition per **psychotherapy** dose based upon the stored data; and administering **psychotherapy** to patients in the group in accordance with the computed changes in **psychological** condition per **psychotherapy** dose.

15o A **method** according to claim 14F wherein the

10 change in **psychological** condition per dose-is computed for each patient in the group of patients.

16e A **method** according to claim 15, further comprising the step of allocating **psychotherapy** among the patients in the group in accordance with the computed change in **psychological** condition per dose for each patient in the group,

17 A **method** according to claim 14, wherein the change in **psychological** condition is 'computed for each **psychotherapy** provider in a group of **psychotherapy** providers who has performed said administering step.

18* A **method** according to claim 17r further comprising the step of allocating **psychotherapy** resources among the **psychotherapy** providers in the group in accordance with the computed change in patient 25 **psychological** condition per dose achieved by each provider in the group.

19 An apparatus for measuring the **psychological** condition of a patient to facilitate determining outcome of patient **psychotherapy** , comprising: input means for entering **psychological** test data relating to a patient's **psychological** condition with respect to at least one **psychological** variable; a memory including a database for storing the entered data; and processing means for...

...mental health index from the entered data, said mental health index representing the patient's **psychological** condition with respect to said at least one **psychological** variable.

20 The apparatus of claim 19, wherein the **psychological** variables measured include at least one of subjective well being, symptomatic distress, current life functioning...

...apparatus of claim 19 wherein the database comprises: data corresponding to patient responses to a **questionnaire** ; and data corresponding to clinician responses to a **questionnaire** .

22 The apparatus of claim 20, wherein the processing means further comprises means for computing...

...22, wherein the processing means further comprises means for computing a 5 benchmark value of **psychological** normalcy from the data in the database,

24 The apparatus of claim 23t wherein the processing means further comprises means for computing a benchmark **psychotherapy** dose-response value.

25 The apparatus of claim 24, wherein the processing means further comprises means for comparing the

patient's measured **psychotherapy** dose response with a benchmark value of dose-response.

28 Apparatus for measuring the **psychological** condition of a patient comprising:

means for receiving **psychological** test data relating to at least one patientf said test data including data relating to at least one

psychological variable, and for presenting the received data as digital signals;

means for ...said digital signals

and selecting therefrom the signal portions

relating to said at least one **psychological** variable;

means for computing a single-valued

quantityr representing the **psychological**

condition of a patient with respect to said at

least one **psychological** variabler from said

selected digital signals; and

means for comparing said single-valued

quantity with a predetermined benchmark quantity

representing a benchmark **psychological** condition

to obtain an indication of the patient's

psychological condition with respect to said

benchmark condition.

29 The apparatus of claim 26, wherein said...

...of said various times to

obtain an indication of the change in the patient's

psychological condition over the time interval.

. 30. The apparatus of claim 27, wherein said comparing means...

...valued quantity with a predetermined

benchmark quantity representing a benchmark time rate of

change of **psychological** condition, to obtain an indication

of the time rate of change in the patient's **psychological**

condition with respect to said benchmark rate.

31 The apparatus of claim 26, wherein said

test data includes data relating to a plurality of

psychological variables, said examining and selecting

means includes means for selecting from said digital

signals the portions relating to each of said plurality of

psychological variables, and said computing means includes

means for computing said single-valued quantity with respect...

...digital signals.

33 The apparatus of claim 30, wherein said

predetermined benchmark quantity represents a

psychological condition of normalcy.

34 The apparatus of claim 30, wherein said

test data includes data...

...plurality of patients, and said

predetermined benchmark quantity represents a time rate of

change of **psychological** condition.

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APPARATUS AND METHOD FOR MOVEMENT COORDINATION ANALYSIS
APPAREIL ET METHODE D'ANALYSE DE LA COORDINATION DES MOUVEMENTS

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APPARATUS AND METHOD FOR MOVEMENT COORDINATION ANALYSIS
APPAREIL ET METHODE D'ANALYSE DE LA COORDINATION DES MOUVEMENTS

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Detailed Description

Claims

English Abstract

Method and apparatus for evaluating among the trunk and limbs of the body the distribution of...

French Abstract

La presente invention concerne une **methode** et un appareil permettant d'evaluer, outre le tronc et les membres du corps, la...

Detailed Description

5

DESCRIPTION

Technical Field

This invention relates generally to medical diagnostic devices and **methods**, and in particular to diagnostic tools for selectively evaluating the distribution and extent of disorders...can be unequally distributed between sensory and motor aspects of posture and movement control

Nervous **system** disorders which impair the brain centers and associated efferent neural **pathways** controlling activities of the body musculature affect the motor components of posture and equilibrium control...an equilibrium position following perturbations therefrom

Disruption of the brain centers and associated afferent neural **pathways** from peripheral receptors and muscles, in contrast, disrupts ability to receive and correctly interpret incoming...see for example Kendal and Schwartz, 1981; Chapters 24, 27, and 28)

Presently available clinical **methods** do not selectively assess both the type and the distribution of sensory and motor disorders...

...muscle produces a brief stretch input exciting stretch receptor organs and, by way of spinal **pathways**, **motor** units of the perturbed muscle. Since muscles isolated from I central brain efferent controls tend...is asked to sense the position of a limb as it is passively moved. This **method** determines the extent of conscious position sense. In the control of posture and equilibrium, however...

...reliably used to determine the nature and extent of sensory impairment in the posture control **system**

(4) Peripheral nerve conduction velocities: There are a

number of ...for quantifying the speed of signal conduction within the peripheral motor and sensory nerves. These **techniques** can determine the distribution and extent of nerve damage contributing to an inability to contract...

...nerve conduction velocities is useful to rule out the possibility of peripheral nerve involvement. This **technique**, however, cannot separate and characterize sensory and motor impairment due to spinal cord and central...sensory and motor components of posture and equilibrium

In addition, to the standardized clinical assessment **methods**, devices have been developed to quantify measures human postural sway and postural movements. Several manufacturers currently produce fixed forceplate **systems** (Kistler Corporation, 75 John Glen Drive, Amherst, New York, 14120; Advanced Medical Technology, Inc., 141...Njiokiktjien and de Rijke, 1972; Japanese authors)

Disclosure of the Invention

The present invention provides **methods** and devices for evaluating among the trunk and limbs of the body the distribution two...independently impair functions in some body and limb parts

The present invention incorporates the following

methods: (1) The subject assumes a position of equilibrium while at least two body or limb...standing or seated on the support surface

Description of Specific Embodiments

Recent investigations describe platform **systems** which, in addition to measuring surface reaction forces, are movable by hydraulic or electric motor...whereas normals respond symmetrically with the two feet. These authors, however, have not developed a **system** for categorizing normal and abnormal postural movements ...performance of standing and walking posture and movement control tasks. A computerized infra-red video **system** allows the positions of a number of markers to be plotted in space (Wattsmart **system** by Northern Digital Ltd., 415 Phillip Street, Waterloo, Ontario, Canada N2L 3XQ)

According to **methods** described in the inventor's previous application serial number 873,125, filed June 11, 1986...surrounding his field of view with a sway-referenced visual enclosure, however, the above **procedure** can be repeated in the absence of useful visual orientation information

The ability of the...June 11, 1986 as

well as

using devices described in the literature. In one such **method**, the distribution of vertical and horizontal forces exerted by each supported body part against the...transducers to the body (Nashner, 1970 and 1971) or optically using photographic or video recording **techniques** (for example Watts-mart **System**)

In addition to selectively evaluating ability to receive and interpret support surface inputs from body...able to receive and interpret support surface inputs from the one body or limb part

Methods for quantitatively assessing the subject's ability to execute the coordinated postural movements necessary to...

...serial number 408,125, filed August 16, 1982, now abandoned. That application 30 included the following **method** disclosures for eliciting corrective postural movements in a subject maintaining an assumed equilibrium position: (1 previous application also included the following **method** disclosures for computing parameters of coordination related to the subject's corrective postural movements: (1...t

'r parameters for each body part and each direction of perturbation. I develop a **system** for categorizing active force responses which uses the latency and strength parameters for differing body...

...and perturbation ' directions

In parent application serial no. 408,184 there was described a second **method** for computing "Timing" and "Structure" parameters of postural movement coordination during corrective postural movements. This **method** uses measures of electromyographic (EMG) ...and horizontally displace the optional hand-held manipulandum (19)

In a preferred embodiment of a **method** according to the present invention, the subject (10) assumes an erect standing position in equilibrium...accordance with a protocol implemented by the program means which I call the Sense Test **Procedure** (STP), spontaneous changes in the AP stance orientation angle are measured and then transmitted to **system** for categorizing the subject's ability to use support surface inputs from each leg is...

...age-matched normal individuals performing under the same
- 4 conditions. Comparisons are made using statistical
methods well-known in the prior art for identifying
significant-differences. The categories for classifying
abnormal...in center of mass displacement
position over time. The time course of displacements under
Test Procedure X for condition 1 is shown in 30, for
condition 2 in 31, for condition...ical of a Category B (unilateral
abnormal) individual

The time course of displacements under Test Procedure X for
condition 1 is shown in 40, for condition 2 in 41, for
condition...by a protocol, implemented by the
.15 program means, which I call the Motor Test Procedure
(MIP). Brief horizontal, linear displacements of the
support surface in one direction perturb the position...direction, it is
then possible to determine
the the distribution of postural movement abnormalities

A system for categorizing a subject's ability to
execute effective postural movements with the two legs...values between
the
two legs, two directions, and subject populations can be
determined-by statistical methods well-known in the prior
art
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35

M= TEST SURFACE REACTIE FORCES OF T...for
age-matched normals

TABLE II

CATEGORIES FOR NORMAL AND ABNORMAL

In accordance with my system for categorizing normal
and abnormal postural movements, subjects are placed in
Latency Category A whose...side B) sway, the relative strength of. such
muscle responses, and the timing thereof. By- techniques of
graphic analysis, or direct computation from the underlying
signal traces, this quantifying data may...the reverse sequence of
antagonist
activation was again observed in muscles of the spastic
leg

Methods of the present invention for quantifying,
separately -in the less-involved and in the spastic ...antagonist
co-activation was greater

It is possible to combine the Sense and Motor Test

Procedures such that ...execute postural movements in the
other leg can be selectively assessed. This combination of
test procedures is useful for identifying more subtle forms
of abnormal sensory processing and movement coordination in...

...within the normal range (Category N) when both legs receive
useful support surface inputs. These procedures are
combined by repeating the Motor Test Procedure for Sense
Test Procedure conditions 3 and 4. (Note that the Motor
Test Procedure is normally run under Sense Test Procedure
condition 1 only.) For each repetition of the Motor Test
Procedure, methods identical to those described in Figs. 6
and 7 and Table II are repeated to...

...categories as a function of the sensory test condition

For those subjects whose Motor Test **Procedure** results show no asymmetries in Latency (category A or N) or Strength (category N) parameters...

...distribution of support surface inputs. Sensory Distribution categories are based on differences in Motor Test **Procedure** Latency and Strength categories between trials run under Sense Test **Procedure** conditions 1, 3, and 4. Again, statistical methods well-known in the prior art can be used to identify significant differences in parameter values. A system according to the present invention for establishing categories for normal and abnormal sensory distribution is shown in Table III

30

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DISTRISUIICV

LATENCY AND STRENGTH CATEGORIES

CATEGORIES

MOTOR I T **PROCEDURE**

Condition 1 Conaiton 3 Condition 4

A. Abnormal L amp; S = A, N L or...asymmetries in Latency and Strength (Motor Test categories A or N) when the Motor Test **Procedure** is applied under sensory condition 1 but shows either one or a combination of lateral...

...asymmetries in

Latency and Strength (Motor Test categories A or N) when the Motor Test **Procedure** is applied under sensory condition and 3 but shows either one or a combination of lateral and directional asymmetries when the same **procedure** is applied under sensory condition 4. A subject is--placed in category C' (sensory distribution...

...asymmetries in Latency

and Strength (Motor Test categories A or N) when the Motor Test **Procedure** is applied under sensory condition 1 and 4 but shows either one or a combination of lateral and directional asymmetries when the same **procedure** is applied under sensory condition 3. Finally, a subject is placed in category N (normalcategories A or N) when the Motor Test **Procedure** is applied under sensory condition 1, 3, and 4

Some subjects may be unable to...

...with a gain of unity. Therefore, it is

30sometimes- necessary to modify the Sense Test **Procedure** with the sway-reference gains reduced from unity to a fraction

This modification provides the...the sway-reference gains above unity

It is also possible to modify the Sense Test **Procedure** such that a simpler device can be used to identify normal and abnormal parameters for...compliant element and thereby rotate the surface

It is possible to modify the Motor Test **Procedure** so

that ability to execute postural movements is assessed while the subject relies on only...torque) in the leg supported by the shortened support surface. By repeating the Motor Test **Procedure** with one foot at a time supported by a shortened support surface and by determining Latency and Strength parameter values for each leg, it is possible to re-apply the **system** for establishing categories for normal and abnormal ...movement control described in Table II

It is further possible to modify the Motor Test **Procedure** so that ability to execute postural movements while the subject relies on one leg at...resulting postural movements produced by the supporting leg are measured and categorized using the same **system** for categorizing normal and abnormal postural movement control described in Table II

A-protocol implemented by the program means which I call the In-Place Stepping Motor Test **Procedure** includes the following **procedures** : (1) The subject assumes a standing position of-equilibrium on two independent support surfaces. (2)...displacement. (5) The properties of the resulting postural movement back to equilibrium are determined by **methods** similar to those described for the Motor Test Protocol. (6) Steps 4 and 5 are...and Strength parameter values are determined for each leg and for each displacement direction using **methods** similar to those described for the Motor Test Protocol. (S) Postural movements of the left...

...according to criteria described in Table II

it is possible to modify the Motor Test **Procedure** so that the ability of the subject to execute postural movements in the two legs...the left to right changes in position of the vertical force center using the same **methods** as with the records of front to back change in position of the vertical force center shown in Figure 6

It is possible in the .Motor Test **Procedure** to use alternative means to produce brief anteroposterior and lateral displacements of the subject from...in instances such as described in this paragraph, the coordination parameters can be determined using **methods** similar to those described in connection with the horizontal, linear, displacement perturbations

it will be...be considered as postural muscles in appropriately created tests in a fashion analogous with the **methods** described above

25

30

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APPENDIX - LIST OF REFERENCES

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Claim

What is claimed is:

1. A **method** for selectively assessing in one body or limb part at a time the following substrates...

...part for

re-establishing the assumed equilibrium position following a brief transient perturbation therefrom, such **method** comprising:

A. placing the subject on a plurality of independent support surfaces and having the...support in response to the brief transient perturbation

t

c

ns;

35

G. repeating **procedures** C, D, E, and F with differing portions of the support surfaces fixed and moving...and for executing postural movements against the support surface based on the measured quantities.

.-k- **method** according to claim 1, wherein step A includes the additional step of obstructing the subject's vision.

3. A **method** for selectively assessing in one supporting leg at a time the following substrates of standing...

...for re-establishing an assumed standing

equilibrium position following a brief transient perturbation therefrom, such **method** comprising:

A. standing the subject with one foot on each of two independently movable support...of leg muscles providing postural support in

response to the brief transient perturbations;

G. ,repeating **procedures** C, D, E, and F with each of the four combinations of the two support...for executing postural movements against the support surface based on the measured quantities.

4. A **method** according to claim 3, for selectively assessing in one supporting leg at a time the...wherein step A includes the additional step of obstructing the subject's vision.

5. A **method** , using actively movable support surfaces,
for selectively assessing in one supporting leg at a time...

...position in the
anteroposterior plane of motion (hereinafter termed AP
stance support surface inputs), such **method** comprising:
A. standing the-subject with ...standing
equilibrium position (hereinafter termed AP stance
orientation angle) ;
C. performing the Sensory Test **Procedure** as
follows: C1. fixing both support surfaces
C2. recording the extent of spontaneous changes
in...of the support
surfaces rotated in relation to the AP stance
orientation angle

6. A **method** , using passively compliant support
surfaces, for selectively assessing in. one supporting leg
at a time...

...position in the anteroposterior plane of motion
(hereinafter termed AP stance support surface inputs), such
method comprising:
A. standing the subject with one foot on each of
two adjacent support surfaces...least one quantity related to the
AP stance orientation angle;
C. performing the Sensory Test **Procedure** as
fc
or s:.
C1. fixing both support surfaces
C2. recording the extent of spontaneous...support
surfaces
compliant to changes in angle about
the support surface rotation axis

7. A **method** for selectively assessing in one supporting
leg at a time the ability to utilize support establishing an assumed
standing
equilibrium position following a brief transient
perturbation therefrom, such **method** comprising:
A. standing the subject with one foot on each of
two independently movable support...the contractile activities of a
plurality of leg muscles providing postural support; T
F. repeating **procedures** C, D, and E with each of
the four combinations of the two support surfaces...executing
effective postural movements against the support surface
based on the measured quantities.

6. A **method** for selectively assessing in one supporting
leg at a time the ability to-execute postural stance orientation angle,
such

method comprising:
A. standing the subject with one foot on each of
two adjacent support surfaces...

...forward and backward in the
25 anteroposterior direction-of motion;
B. performing the AP Motor Test **Procedure** as
follows:
B1. perturbing on a brief transient basis in the

forward direction the subject...

...surface (r

termed AP movement forces) in response to the
brief forward perturbations;

B3. repeating **procedures** B1 ...and substantially similar to one
another for

both legs and both perturbation directions

9. A **method** , according to claim 5, for selectively
assessing in one supporting leg at a time the backward by
displacing the support surface forward on a brief transient
basis.

10. A **method** , according to claim 8, for selectively
assessing in one supporting leg at a time the...push in the posterior
direction against the handle on a
brief transient basis.

11. A **method** , according to claim 8, for selectively
assessing in one supporting leg at a time of...support surface
displacement
while the subject bears full weight with the other leg.

12. A **method** , according to claim 8, for selectively
d assessing in one supporting leg at a time...against
30the handle while the subject bears full weight with the
other leg.

13. A **method** for selectively assessing in one
supporting leg at ...center of body mass in the lateral direction
(hereinafter termed lateral stance orientation angle), such
method comprising:

A. standing the subject with one foot on each of
two adjacent support surfaces;

B. performing the Lateral Motor Test **Procedure** as
follows

B1. perturbing on a brief transient basis in the
leftward direction the subject...surfaces
(hereinafter termed lateral movement forces)
in response to the brief leftward
perturbation;

B3. repeating **procedures** B1 and B2 with brief
transient rightward perturbation of the
assumed equilibrium position;

C. determining...Category N
whose Strengths are substantially similar for
leftward and rightward perturbation
directions

14. A **method** , according to claim 13, for selectively
assessing in one supporting leg at a time ...equilibrium
rightward by a brief waveform of leftward displacement of
the support surface.

15. A **method** , according to claim 13, for selectively
assessing in one supporting leg at a time the...pull in the rightward
direction against the
handle on a brief transient basis.

16. A **method** , according to claim 13, for selectively

assessing in one supporting leg at a time of...surface displacement while the subject bears full weight with the other leg-.

17. A **method**, according to claim 13, for selectively assessing in one supporting leg at a time of...against the handle while the subject bears full weight with the other leg.

18. A **method** for selectively assessing in one supporting leg at a time the ability to utilize support perturbation in the AP

stance orientation angle produced by support surface displacement, such **method** comprising:

A. standing the subject with one foot on each of two independently movable support...

...to the

AP stance orientation angle;

C. performing the combined AP Sensory and Motor Test **Procedure** as follows:

C1. rotating on a continuous basis a combination of the two support surfaces...each leg against its supporting surface in response to the brief forward perturbations

C4. repeating **procedures** C1, C2, and C3 with each of the four combinations of the two support surfaces...each leg against its supporting surface in response to the brief forward perturbations

C5. repeating **procedures** C4, C5, and C6 with each of the four combinations of the two support surfaces...orientation angle is in Latency Categories A or N and Strength Category N.

19. A **method** for selectively assessing in one supporting leg at a time the ability ...the

AP stance orientation angle; T

C. performing the combined AP Sensory and Motor Test **Procedure** as follows:

C1 rotating on a continuous basis a combination of the two support surfaces brief forward perturbations

C3. repeating **procedures** C1, C2, and C3 with each of the four combinations of the two support surfaces...each leg against its supporting surface in response to the brief backward perturbations

C7. repeating **procedures** C4, C5, and C6 with each of the four combinations of the two support surfaces...orientation angle is in Latency Categories A or N and Strength Category N.

20. A **method** for determining the extent of a subject's independent ability, following a brief perturbation, to...

...by coordinating the

contractions of muscles providing postural support for the position-in equilibrium, such **method** comprising:

...least one of the temporal order, amplitude or distributional relationship of such contractions.

21. A **method** for determining a subject's independent

ability to maintain an upright standing position in equilibrium...

- ...trunk muscles in response to-linear displacements in the position of the support surface, such **method** comprising:
- A. standing the subject on a support ...axis") and having him face along a horizontal axis;
 - B. measuring, using a electromyographic recording **technique**, the contractile activity in a selected group of leg and trunk muscles;
 - C. displacing the...

...the contractions of muscles providing postural support as follows:

- D1. generating a signal (hereinafter terms "**processed** EMG signal") related to the instantaneous amplitude of each EMG signal by full-wave rectifying signal;
- D2. measuring the latencies of any increases and decreases in amplitude of the **processed** EMG signal of each muscle following onset of the displacement using in each case a statistical criterion to determine when the amplitude level of each **processed** EMG signal first deviates from that recorded in a predetermined prior time interval;
- D3. computing coefficients of correlation for the **processed** EMG signals between selected pairs of muscles during selected brief intervals of time following onset...values of an age-matched normal population of subjects undergoing the same motions.

22. A **method** according to claim 21 for determining a subject's independent ability to maintain an upright...the subject face in the direction of the horizontal support surface displacement axis.

23. A **method** according to claim 22, for identifying subjects who are abnormal with respect to the ability...

...values which deviate significantly from the normal population according to a statistical criterion.

24. A **method** according to ...the subject face at right angles to the horizontal support surface displacement axis.

25. A **method** according to claim 24, for identifying subject who are abnormal with respect to the ability...deviate significantly from those of the normal population according to a statistical criterion.

26. A **method** according to claim 22, for determining a subject's independent ability to maintain standing position...the stance orientation of the subject and the

inclination of the support surface.

27. A **method** according to claim 26, for identifying subjects who are abnormal with respect to the ability...deviate significantly from those of the normal population according to a statistical criterion.

.28. A **method** according to claim 20, for determining the extent of a subject's independent ability to...such axis; and wherein step B includes the further step of measuring, using an electromyographic **technique**, the contractile activity in a selected group of leg and trunk muscles; and wherein step C further includes

C1. generating a signal (hereinafter termed "**processed** EMG signal"); related to the instantaneous amplitude of each EMG signal by full-wave rectifying...

...the signal;

C2. measuring the latencies of any increases and decreases in amplitude of the **processed** EMG signal ...using in each case a statistical criterion to determine when the amplitude level of each **processed** EMG signal first deviates from that recorded in a predetermined prior time interval;

C3. computing coefficients of correlation for the **processed** EMG signals between selected pairs of muscles during selected brief intervals of time following onset...values of an age-matched normal population of subjects performing the same task.

29. A **method** according to claim 2E for identifying subjects who are abnormal with respect to the ability...from those of the normal population according to a statistical criterion of significance.

30. A **method** for determining a subject's independent ability to maintain position in equilibrium by coordinating contractions...

...of arm

muscles while performing certain arm motions with respect to an external object, such **method** comprising;.

A. - placing the subject on a support surface in a position of equilibrium;

B...

...a handle placed within his reach, with one hand;

C. measuring, using an electromyographic recording **technique**, the contractile activity in a selected group of leg, trunk and ...E. analyzing the subject's muscle responses as follows:

E1. generating a signal (hereinafter termed "**processed** EMG signal") related to the instantaneous amplitude of each EMG signal by full-wave rectifying...

...the signal;

E2. measuring the latencies of any increases and decreases in amplitude of the **processed** EMG signal of each muscles following onset of the handle displacement (or signal to move predetermined prior time interval;

E3. computing coefficients of correlation for the **processed** EMG signals between selected pairs of muscle during selected brief intervals of time following onset subjects performing the same task.

31. A **method** according to claim 30, wherein step A includes the further step of seating the subject...and forth in the anteroposterior direction-with respect to the subject's orientation.

32. A **method** according to claim 30, wherein step -A includes the further step of seating the subject...the handle back and forth in the anteroposterior direction upon perceiving such signal.

34. A **method** according to claim 32, wherein step D includes the ...the handle back and forth in the lateral direction upon perceiving such signal.

35. A **method** according to claim 30, wherein step A includes the further step of having the subject...anteroposterior direction with respect to the subject's orientation upon perceiving such signal.

36. A **method** according to claim 30, wherein step A includes the further step of having the subject...of motion with respect to the subject's orientation upon perceiving such signal.

37. A **method** according to claim 30, wherein step A includes the further step of having the subject such signal.

38. A **method** for determining a subject's independent ability to maintain an upright seated position in equilibrium...

...trunk muscles in response to linear displacements in the position of the support surface, such **method** comprising:

. A. seating the subject on a support surface, independently displaceable along a horizontal axis (hereinafter termed the "horizontal support surface displacement axis");

B. measuring, using an electromyographic recording **technique**, the contractile activity in a selected group of leg and trunk muscles;

C. displacing the...the contractions of muscles providing postural support as follows

D1. generating a signal (hereinafter termed " **processed** EMG signal") related to the instantaneous amplitude of each EMG signal by full-wave rectifying...

...the signal;

D2 measuring the latencies of any increases and decreases in amplitude of the **processed** EMG signal of each muscle following onset of the displacement or signal to move theD3 computing coefficients of

correlation for the **processed** EMG signals between selected pairs of muscles during selected brief intervals of time following onset...

...values of an age-matched normal population of subjects performing the same tasks.

39. A **method** according to ...the subject face along the direction of the horizontal support surface displacement axis.

40. A **method** according to claim 38, wherein step A further includes the step of having the subject...

Set	Items	Description
S1	290411	PSYCHIAT? OR PSYCHOSOMAT? OR PSYCHOLOG? OR PHYSIC?()THERAP? OR PSYCHOTHERAP? OR PSYCHO()THERAP? OR CHIROPRACT? OR BIOFEE- DBACK? OR BIO()FEEDBACK?
S2	8996	ENERG?(2N) (HEALTHCARE OR HEALTH()CARE OR MEDICIN?) OR NEUR- OMODULAT? OR NEURO()MODULAT? OR NMT OR ACUPRESS? OR ACU()PRES- S?
S3	2880986	PATHWAY? OR PATH() (WAY OR WAYS) OR QUERIE? OR QUERY? OR QU- ESTION? OR INTERROGAT? OR INTERVIEW?
S4	3655	(MUSCLE()RESPONSE) (5N) (TEST? OR RATE? ? OR RATING OR ASSES- S? OR APPRAIS? OR EVALUAT? OR MEASUR? OR DETERMIN? OR ESTIMAT? OR GAUG? OR DIAGNOS? OR MONITOR?) OR MRT
S5	5853	(PATIENT? OR SUBJECT? ?) (10N) (PRACTITIONER? OR THERAPIST?)
S6	175	DNFT OR DIRECT() (NONFORCE OR NON()FORCE) ()TECHNIQUE OR MUS- CLE()TEST? OR (ORING OR O()RING) ()TEST? OR LEG()LENGTH()TEST? OR PHYSIC?()STIMULAT?
S7	112	(SEMANTIC? OR CLINIC?) (3N)ALGORITHM?
S8	0	(CONCIOUS? OR SUBCONCIOUS?) ()LEVEL?
S9	0	(OPTIM? OR CORRECT?) (2N) (COMMAND()STATEMENT?) OR (VERBAL? - OR NONVERBAL?) ()CORRECT?()COMMAND?
S10	26541	DYSFUNCTION? OR AUTONOMIC?() (FUNCTION? OR RESPONSE?)
S11	2371343	POSTUR? OR POSITION?
S12	99	(PATHWAY? OR PATH() (WAY OR WAYS)) (3N) (PERNICIOUS? OR SENSO- RY? OR MOTOR? OR ALLERG? OR INFECT? OR EXOGENOUS? OR TOXIN? OR MORPHIC?)
S13	491512	METHOD? ?
S14	3787032	SYSTEM? ?
S15	2268729	PROCESS??
S16	493342	PROCEDURE? ?
S17	262408	TECHNIQUE? ?
S18	1513470	TREAT?
S19	9082	CURING
S20	4146	CURATIV?
S21	2398839	HEAL?
S22	575804	CORRECT???
S23	82921	CURE
S24	11931	CURES
S25	21214	CURED
S26	52620	REMEDY?
S27	39627	REMEDIE?
S28	9	S1:S2 AND S3 AND S4
S29	77143	S1:S2 AND S3
S30	2849	S29 AND S18:S27(5N)S13:S17
S31	0	S30 AND S4
S32	86	S30 AND S5
S33	5	S30 AND S6:S9
S34	1	S30 AND S12
S35	728	S30 AND S10:S11
S36	8	S35 AND S3(5N)S5
S37	101	S28 OR S32:S34 OR S36
S38	0	S30 AND LESLIE(2W)FEINBERG
S39	23	S29 AND FEINBERG
S40	2	S39 AND LESLIE
S41	0	S29 AND LESLIE(2W)FEINBERG
S42	123	S37 OR S39:S40
S43	119	S42 AND PY<2004
S44	106	RD (unique items)

? show files

File 20:Dialog Global Reporter 1997-2004/Jun 16

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44/3,K/15

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30835886 (USE FORMAT 7 OR 9 FOR FULLTEXT)

What's the alternative, doctor?

SECTION TITLE: FEATURES

DEKKER Diana

DOMINION POST , 2 ed, p3

August 23, 2003

JOURNAL CODE: WTDP LANGUAGE: English RECORD TYPE: FULLTEXT

WORD COUNT: 2110

(USE FORMAT 7 OR 9 FOR FULLTEXT)

... a closing of the gap between medical and alternative models has been predicted, but though **chiropractors** and some acupuncturists are now able to offer their services paid for by ACC, there...it's good if people can work together. I work with other doctors and medical **practitioners** and medical doctors refer **patients** to me. Doctors don't sit there with a blind eye."

Dr Shelton graduated in...

... every cell tissue and organ in different permutations in different individuals. Recognised as a holistic **health** care **system** by the World **Health** Organisation.

Chiropractic

Founded in 1896 in the United States, in Iowa, literally meaning "practice by hand". It...and intuition.

Kinesiology

Identifies imbalances in the body said to be manifested through muscles and **treats** them with a range of **procedures**.

Medical herbalism

The therapeutic use of plants to treat disease.

Naturopathy

A way of life...

... the belief that language can achieve specific outcomes such as adopting or eliminating certain behaviours.

Psychotherapy

Recognises the place of the past in shaping experience and seeks to enhance self-awareness...

...those arising from birth and early life experiences.

Acupuncture

Precise needling of points along energy **pathways**, known as meridians, to release blocked energies and restrain over-exuberant energies.

20030823

44/3,K/62

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18137633 (USE FORMAT 7 OR 9 FOR FULLTEXT)

**Mind/Body Medicine Offers New Hope: Taris 5-Element Homeopathic Remedies
Bridge Gap Between Physical & Emotional Health**

PR NEWSWIRE

August 02, 2001

JOURNAL CODE: WPRW LANGUAGE: English RECORD TYPE: FULLTEXT

WORD COUNT: 465

(USE FORMAT 7 OR 9 FOR FULLTEXT)

... the release of the new Taris 5-Element homeopathic line and emotional/physical meridian response **questionnaire** developed by leading acupuncturist, Dr. T. Aristotle.

Chronic depression, unresolved grief, anger, excessive worry or...

... alternatives." The Taris 5-Element homeopathic remedies (fire, earth, metal, water and wood) present health **practitioners** and their **patients** with more options by merging Asian medicine and European based homeopathic formulas.

... physical health originated approximately 5,000 years ago in ancient China and Europe and these **health** conditions were **treated** using acupuncture **techniques**. This set the foundation for the development of the Taris 5-Element homeopathic remedies and 5-Element **questionnaire**.

The homeopathic remedies address emotional and physical meridian reflexes associated with the 5-element **system** of **healing**. Practitioners from **health** fields such as **psychology**, dentistry, **chiropractic**, medical, acupuncture and naturopathy are easily integrating the Taris 5-Element homeopathic remedies into their...

... Aristotle's research and clinical observations also led to the development of a ten-page **questionnaire** to evaluate a patient's acupuncture meridian system and how it relates energetically to their physical and emotional status. Patients answer **questions** relating to taste preferences, dislikes, emotional tendencies and physical ailments.

Practitioners can then easily tabulate and review **patient** responses and recommend the appropriate homeopathic remedy. These **questions** originated from historical references in ancient Chinese medical textbooks.

Aesclepius International is a company that...

... lectures internationally on new techniques in alternative medicine. He is a licensed acupuncturist, doctor of **chiropractic** and practices in Scottsdale, Arizona and Beverly Hills, California. For more information about Taris 5-Element homeopathy or **questionnaire**, contact Aesclepius International at 800.295.0648 or visit their website at www.taris.cc...

20010802

44/3,K/64

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17213365 (USE FORMAT 7 OR 9 FOR FULLTEXT)

Health: An alternative that worked for me

After years of irritable bowel syndrome, Ashley Franklin was at the end of his tether. Then he discovered applied kinesiology...

Ashley Franklin

INDEPENDENT

June 14, 2001

JOURNAL CODE: FIND LANGUAGE: English RECORD TYPE: FULLTEXT

WORD COUNT: 1402

(USE FORMAT 7 OR 9 FOR FULLTEXT)

... heard about applied kinesiology, through BBC Radio Derby.

A phone-in guest, Ian Reed, a **chiropractor** from Derby's Wellbeing Clinic, talked to listeners of how he had embraced applied kinesiology...

...be detected through the function of the muscles. It draws upon the principles of **acupressure** and the body's energy **pathways** to identify imbalances and correct them through manipulation and using a variety of alternative therapies.

Ian Reed explains: " **Chiropractic** philosophy is based around our nervous system, which either controls or influences movement, chemical reactions...

... Ian placed his hand on my outstretched arm, instructing me to push against him to **test** the **muscle response**. Each time a different food was dropped on my tongue, my arm stiffened.

So far...

... fruit pasta and potato, and with my arm stiffening up every time, I began to **question** where this was going. Is it any wonder? All my previous ailments had relied on... may be a parasitic infestation, a candida overgrowth, food intolerance, a chronic viral infection or **psychological** state. Once having found the cause, the rest is fairly easy to correct."

Ian Reed...

20010614

44/3,K/68

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15400232 (USE FORMAT 7 OR 9 FOR FULLTEXT)

Scientific validity, effectiveness of therapy questionnaire debated

JOANNE WOJCIK

BUSINESS INSURANCE, p3

January 29, 2001

JOURNAL CODE: WCBI LANGUAGE: English RECORD TYPE: FULLTEXT

WORD COUNT: 1337

(USE FORMAT 7 OR 9 FOR FULLTEXT)

Scientific validity, effectiveness of therapy questionnaire debated

LAGUNA HILLS, Calif.--A new program that systematically measures patients' progress in **psychotherapy** could improve the effectiveness and reduce the cost of mental health treatment, its promoters say.

But at least one independent **psychologist** is skeptical of the program's validity, saying that it needs to be reviewed by experts...

... the program, which was launched two years ago by Laguna Hills, Calif.-based PacifiCare Behavioral Health, a subsidiary of PacifiCare Health Systems Inc. The results have been gathered into a single database that is now being tapped to benchmark and improve **treatment methods**, according to **psychologist** Edward Jones, PacifiCare Behavioral Health's corporate clinical director.

By comparing information provided by both the patient and his or her **psychotherapist** to that contained in the database, the program can predict how a patient in treatment...

... recent telephone press conference. The program also has identified some undetected risks--such as suicidal **patients** and those with chemical dependency problems--that **therapists** missed, he said.

"What we found is that there is frequently a lack of congruence...

...Jones said.

The "LSQ" Mr. Jones referred to is an acronym for the "life status **questionnaire**," a form developed by PBH in conjunction with researchers at Brigham Young University in Salt Lake City. Its **questions** focus on the quality of the patient's family life, his or her moods and...

...use.

If there is a discrepancy between what the patient reports on the 30-item **questionnaire** and the diagnostic information provided by the therapist, a care manager from PBH alerts the...

... paper-and-pencil test, people will respond differently than they would in an in-person **interview** with a therapist." Typically, individuals are more likely to disclose sensitive personal information in writing...

...beginning of this year, after reviewing the ALERT program's results.

But Laguna Nigel, Calif., **psychologist** Marc Skelton, who serves as the chair of the division of clinical practice of the California **Psychological Assn.**, **questioned** whether the approach really is scientific.

"Any effort to try to systematically review treatment is...

...reviewed by an impartial third party outside of managed care," he said.

Mr. Skelton also **questioned** the validity of the 30-item **questionnaire**, contrasting it against the Minnesota Multiphasic

Personality Inventory, which is widely used to conduct **psychological** evaluations. The MMPI, he said, "is 567 items long and includes a validity scale."

A validity scale is a method of determining whether a respondent is answering **questions** truthfully. The MMPI asks the same **question** in a variety of ways to see whether the responses are consistent, he said.

He also **questioned** whether the sampling of patients used as a benchmark in the ALERT database is a scientifically valid cross-section similar to that used in independent studies.

Furthermore, many people seeking **psychological** treatment are suffering great **psychological** distress, so "their ability to accurately report what's going on is **questionable**," he said.

PBH's Mr. Jones explained how the ALERT program works by providing an example. "A 28-year-old woman called for an authorization to see a **therapist**," he said. "At the first session, the **patient** does the initial LSQ, which is faxed to PacificCare Behavioral Health and uploaded into the..."

... signal suicide risk, Mr. Jones said. The highest score possible is 120 points, with each **question** given a weight of four points.

At the second session, the therapist completes a Provider...

...Jones said.

This information is collected by the PBH care manager, who then calls the **therapist** to discuss the **patient**'s treatment plan. In this case, the patient was referred to a **psychiatrist**, who prescribed antidepressants.

At a subsequent session, after the medication had taken effect, the patient...

...So, we're seeing clear improvement," Mr. Jones said. "At session five, she completes the **psychotherapy** but continues on the medication. Then, six months later, the LSQ is mailed to the..."

...a short time," he said.

The care managers, who are master's- and doctoral-level **psychologists** with clinical experience, also work with the treating therapists in a collegial way, "to focus..."

20010129

44/3,K/74

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12555116 (USE FORMAT 7 OR 9 FOR FULLTEXT)

The touch that heals

Roseann Gould

JERUSALEM POST

August 18, 2000

JOURNAL CODE: WJPT LANGUAGE: English RECORD TYPE: FULLTEXT

WORD COUNT: 1380

(USE FORMAT 7 OR 9 FOR FULLTEXT)

... to our topic of pre/post surgical massage and how it can assist in your **healing process**.

What are the benefits of both pre and post-surgical massage?

Pre-surgical massage creates an environment where the woman (or a man) can express fears and ask **questions** that s/he may have felt uncomfortable asking the doctor or possibly did not have time to get into a full discussion. The massage **therapist** can act as a liaison between **patient** and doctor and forward the patient's concerns to the doctor so that they can...

... surgical massage is also a place where the client can take personal responsibility for her **healing process**.

The positive, relaxed environment of the massage clinic allows the patient to express unspoken fears...

...start to talk or if I notice stress in their body I might ask a **question** that may encourage them to express fear, doubt, anger, sadness. I may also use guided...

... I also do some massage to promote comfort to the client. After the tissue has **healed**, I use **techniques** called skin rolling and plucking. These are methods that foster better circulation, drain lymph fluids... areas of my body. I am convinced the massage has contributed significantly to my post **procedure healing**."

K.S., Tel Aviv.

Roseann Gould has been in private practice for more than 25...

... offers a special membership program which includes discounts on complementary as well as conventional care, **psychological** counselling, couple and family therapy, counselling for eating disorders and **physical therapy** specifically geared for pelvic disorders. Membership also includes special discounts for lectures, workshops and Solgar...

20000818

44/3,K/80

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11470518 (USE FORMAT 7 OR 9 FOR FULLTEXT)

Chiropractic Neurologists Managing Patients' Autism, Stroke, Other
Disorders, According to Journal of the American Chiropractic
Association (JACA)

PR NEWSWIRE

June 12, 2000

JOURNAL CODE: WPRW LANGUAGE: English RECORD TYPE: FULLTEXT

WORD COUNT: 1081

(USE FORMAT 7 OR 9 FOR FULLTEXT)

Chiropractic Neurologists Managing Patients' Autism, Stroke, Other
Disorders, According to Journal of the American Chiropractic
Association (JACA)

Preview Copy Available for Journalists

ARLINGTON, Va., June 12 /PRNewswire/ -- Chiropractic neurologists
are gaining respect for their treatment of patients suffering from
hyperactivity, attention deficit disorder...

An article in the June 2000 issue of the Journal of the American
Chiropractic Association (JACA) reports on the growing specialty of
chiropractic neurology and new research in the neurological sciences that
points to chiropractic as a possible non-drug treatment for a host of
baffling disorders.

"Chiropractic is neurology," says Dr. Gail Henry. "That's what we do
-- affect the central nervous...

... muscle, a joint, out into the periphery, and into the central nervous
system."

For example, chiropractic neurologists have successfully treated
attention deficit disorders (ADD/ADHD) without drugs, according to the JACA
...

... the brain. Some respond well to music, but of course, the treatment is
very individualized."

Chiropractic neurology is also addressing autism. "Many children may
be autistic as a result of compromised cerebral and thalamic integration,"
explains Dr. Michael Hall. "A chiropractic neurologist may be able to
provide additional clinical insight and clinical procedures to improve
brain...

...to brain-based clinical disorders."

In keeping with its mission to treat the whole body, chiropractic
neurology is also proving helpful in the management of injuries from
whiplash accidents, traumatic brain...

...many other clinical disorders, according to the JACA article.

Currently, there are 525 board-certified chiropractic neurologists
worldwide recognized by the American Chiropractic Association (ACA). The
specialty has enjoyed an increased popularity over the past 15 years,
according...

... Dr. Frederick Carrick, a distinguished post graduate professor of
clinical neurology at Logan College of Chiropractic and president of the
ACA Council on Neurology. "While neurology has always been the basis of
chiropractic, advanced training in the discipline allows the
practitioner to serve patients at a higher level."

In Other JACA Stories ...

Animal Chiropractic : Turf War Brewing Between Veterinarians and Chiropractors

As complementary and alternative medicine (CAM) continues to gain popularity, many pet owners are beginning...

...Dr. Edward L. Maurer in the June issue of JACA.

"More and more doctors of **chiropractic** are making 'farm and barn calls,'" Dr. Maurer writes in the article. "Invariably, it's...

... Maurer continues. "Frequently, these benefits have come only after exhausting the usual DVM treatment(s). **Chiropractic**, homeopathy, physical or massage therapy, acupuncture, and other forms of health care have demonstrated success...

...Pain, Looking for Answers

For millions of people who have been injured, gone through the **healing process**, but still find themselves aching with unexplained pain months or years later -- there may be...

... an article in the June JACA. New research being conducted by Dr. Geoffrey Bove, a **chiropractor** and full-time neurophysiology researcher at Beth Israel Deaconess Medical Center, will examine the causes...

...axons and pain in distant parts of the body does exist.

There is also the **question** of scar tissue, which forms following an injury and may be left intact when a...

...nearby nerves and axons by limiting their normal movements.

"There are a lot of unanswered **questions** about why what **chiropractors** are doing is working or not working," Dr. Bove says. "All this pain research is directly relevant to what **chiropractors** do."

For a copy of the June JACA, call the American **Chiropractic** Association at 800-986-4636.

/CONTACT: Teri Howell or Felicity Feather of the American **Chiropractic** Association, 800-986-4636/ 17:40 EDT

20000612

44/3,K/104

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01924056 (USE FORMAT 7 OR 9 FOR FULLTEXT)

Yoga of healing: homoeopathy

HINDU

June 14, 1998

JOURNAL CODE: FHIN LANGUAGE: English RECORD TYPE: FULLTEXT

WORD COUNT: 2536

(USE FORMAT 7 OR 9 FOR FULLTEXT)

There are many **systems** of **healing** available today. Of them, homoeopathy, is very popular in India. One of the issues T...

... it is so. In conversation with Dr. A.U. Ramakrishnan, eminent homoeopath.

Excerpts from the **interview** :

T. K. V. DESIKACHAR: There are many **systems** of **healing** available today. Homoeopathy, which you represent, is very popular in India. You are an eminent...

... of the picture before the other comes in. Actually they are complementary. There is no **question** of homoeopathy or any one system absolutely replacing another.

TKVD: Absolutely right. The focus must...

... the temperature, takes the blood pressure and sometimes recommends a blood test. Based on this **procedure** a diagnosis is made and **treatment** is given. If I were to come to you with a complaint how would you...

... even though homoeopathic medicine is harmless and will not have any adverse effect on the **patient** .

TKVD: When people come to a Yoga **therapist** , we look at the body, the emotional state of the person and the state of...principles wherein you are assessing the patient with one body of knowledge and using a **system** of **cure** that does not fit the same body a knowledge as the tools which you used...

...into the individual response of each patient to the environment. I would ask my patient **questions** like which side he prefers to sleep on in order to get good sleep. There...comprehending or analysing. In these patients homeopathy has a positive role to play because homeopathic **medicines** **energise** the patient's system even without the patient making any effort. In such cases, I...

...which are irrefutable and can be put to trial by anyone.

Dr. AR: One concluding **question** . Do you think that all homeopaths and practitioners of other systems of medicine should necessarily...

19980614

Set	Items	Description
S1	1163336	PSYCHIAT? OR PSYCHOSOMAT? OR PSYCHOLOG? OR PHYSIC?()THERAP? OR PSYCHOTHERAP? OR PSYCHO()THERAP? OR CHIROPRACT? OR BIOFEE- DBACK? OR BIO()FEEDBACK?
S2	31797	ENERG?(2N) (HEALTHCARE OR HEALTH()CARE OR MEDICIN?) OR NEUR- OMODULAT? OR NEURO()MODULAT? OR NMT OR ACUPRESS? OR ACU()PRES- S?
S3	6161477	PATHWAY? OR PATH() (WAY OR WAYS) OR QUERIE? OR QUERY? OR QU- ESTION? OR INTERROGAT? OR INTERVIEW?
S4	7995	(MUSCLE()RESPONSE) (5N) (TEST? OR RATE? ? OR RATING OR ASSES- S? OR APPRAIS? OR EVALUAT? OR MEASUR? OR DETERMIN? OR ESTIMAT? OR GAUG? OR DIAGNOS? OR MONITOR?) OR MRT
S5	47847	(PATIENT? OR SUBJECT? ?) (10N) (PRACTITIONER? OR THERAPIST?)
S6	1355	DNFT OR DIRECT() (NONFORCE OR NON()FORCE) ()TECHNIQUE OR MUS- CLE()TEST? OR (ORING OR O()RING) ()TEST? OR LEG()LENGTH()TEST? OR PHYSIC?()STIMULAT?
S7	1816	(SEMANTIC? OR CLINIC?) (3N)ALGORITHM?
S8	3	(CONCIOUS? OR SUBCONCIOUS?) ()LEVEL?
S9	0	(OPTIM? OR CORRECT?) (2N) (COMMAND()STATEMENT?) OR (VERBAL? - OR NONVERBAL?) ()CORRECT?()COMMAND?
S10	140035	DYSFUNCTION? OR AUTONOMIC?() (FUNCTION? OR RESPONSE?)
S11	6727375	POSTUR? OR POSITION?
S12	2078	(PATHWAY? OR PATH() (WAY OR WAYS)) (3N) (PERNICIOUS? OR SENSO- RY? OR MOTOR? OR ALLERG? OR INFECT? OR EXOGENOUS? OR TOXIN? OR MORPHIC?)
S13	2656581	METHOD? ?
S14	16878174	SYSTEM? ?
S15	7805594	PROCESS??
S16	2935336	PROCEDURE? ?
S17	2017983	TECHNIQUE? ?
S18	4121455	TREAT?
S19	60519	CURING
S20	19627	CURATIV?
S21	7125189	HEAL?
S22	1767474	CORRECT???
S23	257701	CURE
S24	47648	CURES
S25	84195	CURED
S26	191023	REMEDY?
S27	173156	REMEDIE?
S28	410915	S1:S2 AND S3
S29	1308	S28 AND (S4 OR S6 OR S7 OR S8 OR S12)
S30	59213	S28 AND S13:S17(5N)S18:S27
S31	60045	S29:S30
S32	129	S31 AND S4
S33	422	S31 AND S3:S4(5N)S5
S34	551	S32:S33
S35	23	S34 AND S10:S11(5N)S5
S36	241	S34 AND S13:S17(5N)S1:S2
S37	204	S36 AND S5
S38	342	S32 OR S35 OR S37
S39	0	S38 AND FEINBERG
S40	342	S38:S39
S41	2	S40 AND S3(5N)S4
S42	24	S40 AND S2
S43	165	S32 OR S35 OR S41:S42
S44	160	S43 AND PY<2004
S45	102	RD (unique items)

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File 160:Gale Group PROMT(R) 1972-1989
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09208920 Supplier Number: 79260969 (USE FORMAT 7 FOR FULLTEXT)

Energy Therapies and Diabetes Mellitus.

Guthrie, Diana W.; Gamble, Maureen

Diabetes Spectrum, v14, n3, p149

Summer, 2001

Language: English Record Type: Fulltext

Document Type: Magazine/Journal; Professional

Word Count: 4967

... presence of a therapist, whether local or long distance, to support and aid in the **healing process**. The literature on diabetes and **healing** therapies is sparse, but there is potential for energy therapy to assist individuals with diabetes...

...focused on illness, whereas energetic healing focuses on the connection of mind, body, and spirit. **Energy medicine** may be useful as a complementary therapy and adjunct to standard allopathic medical approaches.

The...

...symptoms, from lowered cognitive function to irritability, depression, and lethargy are all indications of altered **energy** responses.

Energy medicine is any interpersonal, nonpharmacological intervention that brings about changes in heat, cold, congestion, circulation, or...

...therapies aid in restoring balance, health, and normalized blood glucose levels? Definitive answers to these **questions** are pending. But before reviewing the available research, let us first summarize the theories related...Chinese), "ki" (Japanese), or "prana" (Hindu).

In traditional Eastern medicine systems, meridians are the **energy pathways** or transportation systems that connect and integrate the whole body. The points along the meridian...

...extremely small ductile tubules of the body were found to follow the previously described meridian **pathways**. The use of infrared photography has also shown the existence of these **pathways**. (8) One can alter responses along these meridians through the use of acupuncture and **acupressure**, or by tapping, exercising, stretching, or massaging the meridians.

"Chakras" are found on the major...energy of the person. Shiatsu is a type of massage that works on the energetic **pathways** or acupuncture points and has been described in Traditional Chinese medicine as a useful tool...

...one study, Rusy and Weisman (25) noted that children experienced less pain when given a **method of treatment** involving massage combined with education, relaxation training, hypnosis through guided imagery, **biofeedback**, or acupuncture. The authors described these interventions as complementary to pharmacological pain management. In another...

...the electrical flow in the body through meridians and may be measured by electrical impedance. **Acupressure**, which uses the same acupuncture points, influences the same meridians through the use of manual...

...at the placement sites for the acupuncture needles. (33)

Other Energy Therapies

Microwave Resonance Therapy (**MRT**), a combination of Traditional Chinese medicine and biophysics, has been found useful in surgery, trauma ...

...addition to normalizing blood glucose levels, it is these authors' opinion that therapies such as **MRT** might be useful in altering the physiological imbalances that have occurred because of patients' hyperglycemic...behavioral therapist at MidAmerica Diabetes Associates, a professor emeritus in the departments of pediatrics and **psychiatry** at the University of Kansas School of Medicine, and an adjunct professor at the University...Touch International. Online. Available: www.healingtouch.net

(21.) Barnett L, Chambers M, Davidson S: Reiki **Energy Medicine** : Bringing Healing Touch Into Home, Hospital, and Hospice. Rochester, Vt., Healing Arts Press, 1996

(21...

...Therapy (*)	Definition
Massage	Manipulation of body tissues to bring about increased circulation, relaxation, and energy.
Acupressure	The stimulation of various points or meridians with the use of finger pressure.
Acupuncture	The...
...of	natural healing through the interaction with a universal energy.
Therapeutic Touch	A nursing-based technique for aiding relaxation and healing through the use of the hands (modulation of energy).

(*)Note: These are but a few...

20010622

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09208919 Supplier Number: 79260968 (USE FORMAT 7 FOR FULLTEXT)
Complementary and Integrative Medicine: Emerging Therapies for Diabetes,
Part 1.

Payne, Cynthia
Diabetes Spectrum, v14, n3, p129
Summer, 2001
Language: English Record Type: Fulltext
Document Type: Magazine/Journal; Professional
Word Count: 1803

... research into five major domains of CAM: biological therapies,
manipulative and body-based therapies, alternate **systems** of **healing** ,
mind-body **medicine** , and **energy medicine** (Table 2).

Because of the wealth of emerging information about the various CAM
therapies, we...

...diabetes care. Our articles address vitamin/mineral therapies, energy
therapies, and one of the alternate **systems** of **healing** : Chinese
Medicine. Articles to be published in Part 2 (Diabetes Spectrum Vol. 19,
No. 4...

...of benefits and safety exists, our authors have also included clinical
guidelines. These may aid **practitioners** in responding to their **patients**
' **questions** or inappropriate uses of CAM practices.

In her update on vitamin and mineral dietary supplements...

...about Traditional Chinese medicine (TCM) and diabetes (p. 154) as one
example of an alternative **system** of **healing** . She notes that TCM
practitioners view the human body and its functioning from the perspective
...

...is also chair of the White House Commission on Complementary and
Alternative Medicine Policy. (An **interview** with Dr. Gordon will be
included in Part 2 of this research section.)

At a...innovator for most of her professional life. Currently
employed as a diabetes educator with Innovex **Health Management Systems** ,
she was previously a senior nutritionist at the Joslin Diabetes Center
affiliate and a clinical...

...www.nccam.nih.gov

(4.)Dacher E: Intentional Healing: A Guide to the Mind/Body **Healing**
System . New York, Marlowe & Company, 1996

(5.)Selhub E: The Biology of the Stress Response II...

...of Pennsylvania

Cardiovascular disease	University of Michigan
Natural medicine and prevention	Maharishi University of Management
Chiropractic	Palmer Center for Chiropractic
	Research, Iowa
Craniofacial disorders	Kaiser Foundation Hospitals,
	Oregon
Neurological disorders	Oregon Health Sciences University
Pediatrics...	

...Health

Sciences

Table 2. Domains of Complementary and Alternative Medicine
Manipulative and body-based therapies

- * **Acupressure**
- * Alexander **technique**
- * **Chiropractic** medicine
- * Feldenkrais **method**
- * Massage therapy
- * Neuromuscular therapy
- * Osteopathy
- * Reflexology
- * Rolfing
- Biological therapies
- * Antioxidizing agents
- * Cell treatment
- * Changes in lifestyle
- * Chelation treatment
- * Diet
- * Megavitamins
- * Metabolic therapy
- * Nutritional supplements
- Mind/body interventions
- * Art therapy
- * **Biofeedback**
- * Dance therapy
- * Humor
- * Hypnotherapy
- * Meditation
- * Music therapy
- * Prayer therapy
- * **Psychotherapy**
- * Relaxation
- * Support groups
- * Yoga
- Alternate **systems** of medical practice
- * Acupuncture
- * Ayurveda
- * Community-based practices
- * Environmental medicine
- * Homeopathy
- * Native American medicine
- * Naturopathic medicine
- * Past life therapy
- * Shamanism
- * Tibetan medicine
- * Traditional Oriental (Chinese) **Medicine**
- Energy medicine**
- * Blue light treatment and artificial lighting
- * Electroacupuncture
- * Electrostimulation and neuromagnetic stimulation
- * Magnetic therapy
- * Magnetoresonance spectroscopy...

20010622

45/3,K/20 (Item 4 from file: 149)
DIALOG(R)File 149:TGG Health&Wellness DB(SM)
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01899939 SUPPLIER NUMBER: 61523937 (USE FORMAT 7 OR 9 FOR FULL TEXT)
Therapeutic Touch: A Healing Modality.
Mulloney, Steffanie S.; Wells-Federman, Carol
Journal of Cardiovascular Nursing, 10, 3, 27
April,
1996
PUBLICATION FORMAT: Magazine/Journal ISSN: 0889-4655 LANGUAGE: English
RECORD TYPE: Fulltext TARGET AUDIENCE: Professional
WORD COUNT: 12183 LINE COUNT: 01023

... of energy modulation during which the practitioner uses the hands as a focus to facilitate **healing**. The **technique** involves simultaneously centering awareness, directing compassionate intention, and modulating the flow of human energy using...

...derived from the Anglo-Saxon word haelan, which means to make or become whole. The **healing process** is the innate ability to integrate and balance body, mind, and spirit. Healing is described...

...Healing is not something the nurse does for the patient; rather, the nurse facilitates the **healing process** through knowledgeable caregiving. As Nightingale stated, "Nature alone cures ... and what nursing has to do ...

...upon him."(2(p133)) The nurse, through assessment, therapeutic intervention, and compassionate caregiving, facilitates the **healing process**.

Healing can become blocked in times of stress such as illness or hospitalization because of the...

...is triggered when a person perceives a situation to be a threat to physical or **psychological** well-being and that he or she is unable to cope effectively with the demand...

...pain, tension headaches, insomnia, and gastrointestinal complaints. With repeated or prolonged exposure to physical or **psychological** stress, this response can exacerbate symptoms of diseases that are influenced by central nervous system...

...anxiety, and interrupting the stress-symptom cycle through TT can enhance the body's natural **healing process**, facilitate recovery from illness or injury, promote health, and prevent further complications.

THEORETICAL FRAMEWORK
Krieger...

...This philosophy holds that a universal, unitary life force, or vitality, flows through all living **systems**. A **healthy** individual has an abundance of vitality and therefore can consciously sense and direct this energy with many other valuable therapies such as hundreds of medications, **biofeedback**, relaxation **techniques**, and therapeutic use of presence, the mechanism of action in TT is still unknown. However...

...different energy frequencies that are continually interacting. A human being is a complex, multidimensional energy **system**. From this point of view, **health** or wholeness implies an inner balance among these different

levels or dimensions of energy as...

...to center, no intention to assist the subject, no attuning to the condition of the **subject**, and no direction of energy. **Practitioners** are asked to count backward from 100 by sevens while moving the hands over the ...during the first two sessions, and the third session served as a control with the **practitioner** and **subject** sitting quietly for 20 minutes. Measures of physiologic and **psychologic** stress were collected before, during, and after each session. Physiologic measures included heart rate, skin temperature, blood pressure, and respiratory rate; **psychologic** measures used two visual analog scales, one each for state and trait anxiety.

Data analysis...

...20 to 28 minutes. Both the TT and mimic segments were performed from behind the **subject** by an independent TT **practitioner** (eight of the **subjects**) or by the first author (four of the subjects).

The impact of TT was assessed...confounded by some methodologic issues. The standardized practice of TT was altered in that the **practitioners** assessed and treated **subjects** from behind only. Second, the findings must be considered preliminary because this was an exploratory ...

...Gagne and Towe(34) investigated effects of TT on anxiety. Anxiety is an index of **psychologic** distress and considered incompatible with physical relaxation. These studies test whether TT can influence the subjective **psychologic** experience of anxiety. The strength of this segment of TT research is that it builds...

...through replication and extension. Populations include adult patients awaiting cardiac surgery, older medical patients, and **psychiatric** inpatients.

Heidt's(9) study of 90 hospitalized cardiovascular patients had three groups. One group...

...of TT and relaxation therapy on the anxiety of 31 inpatients at a Veterans Administration **psychiatric** facility. The study compared three groups that received two sessions within 24 hours of TT, relaxation therapy (RT) as described by Benson, (5) or mimic TT with **psychiatric** inpatients suffering moderate to severe anxiety. ...treatment outcome. An attempt was made to analyze expectancy effects with the use of a **questionnaire** labeled "Final Summary." However, expectancy did not correlate with outcome. This result created statistical problems...

...treatment than the other groups, suggesting that the groups were not comparable on this variable.

Questions arise around the methodology used in this study. Specifically, the significant differences in treatment length...

...appears at least as effective as RT as a clinical strategy for anxiety reduction in **psychiatric** inpatients. TT are tested in a new population, which represents an extension of previous research. Gagne and Towe(34) noted that many methods of anxiety reduction were ineffective in **psychiatric** inpatients. Passive anxiety reduction **techniques** such as TT were valuable for many of these patients whose degree of anxiety interferes ...

...5-minute mimic TT treatment; both treatments were administered by Keller.

The McGill-Melzack Pain **Questionnaire**, (39) a subjective instrument

that evaluates the experience of pain, was given before, 5 minutes...an experienced practitioner or a control group in which no treatment was given and the **subject** merely sat for 5 minutes. The TT **practitioner** was hidden behind a specially modified door. **Subjects** in both groups placed their wounded arms through an opening in this modified door. Once...

...these findings was in the administration of TT only to the subject's arm. This **treatment** varied substantially from the standardized **method** described by Krieger(15). Missing from Wirth's discussion⁴¹ of his research were a detailed...

...expectation of healing that most often confounds healing research. This elimination was accomplished by isolating **subjects** from the TT **practitioner**, blinding them to the nature of the intervention during the study, and using an independent...

...compared with those in the control group. The observations of four physicians blind to the **procedure** showed that the **treated** subjects experienced a significant acceleration in the rate of wound healing compared with the control subjects (P (is less than) 0.005). Again the method used varied from standard TT **procedure** in that patients were **treated** behind a one-way mirror. The ...is correct, the practice of TT should enhance or support the immune system of the **practitioner**.

Recently bereaved **subjects** were selected for this study because bereavement is known to temporarily depress immune function. The...

...expected to respond favorably to TT treatment because it is assumed to accelerate the natural **healing process**.

Practitioners had been trained by Krieger and Kunz and had practiced the modality for more than 5 years. Unlike other TT research where **practitioners** were only allowed to treat control and experimental **subjects** for 5 minutes, **practitioners** in this descriptive study were allowed to administer treatments for the length of time that...

...study of the phenomenon as practiced clinically rather than adherence to a specific protocol.

All **subjects** (**practitioners** and recipients) completed **questionnaires** designed to measure baseline anxiety and affect. Blood was drawn for baseline immunologic analysis. These...

...what the impact of the response is in terms of the rest of the immune **system** and **health** status will need to be investigated in future research. One potential hypothesis derived from this...

...reduce anxiety in hospitalized cardiovascular patients, institutionalized older patients, people exposed to natural disasters, and **psychiatric** inpatients. TT may reduce autonomic and central nervous system arousal and the pain of tension...

...Heidt(46) explored the lived experience of TT from the perspective of seven pairs of **practitioners** and **patients**. Data were collected from **interviews** before and after TT treatments and from continuous notes that were made of all verbal...

...a sense of inner, calm to the patient, the patients relaxed and focused on the **healing process**. Heidt's investigation of the lived experience of TT lays the groundwork for future exploration...explored the lived experience of TT from the recipient's perspective. Data were obtained by **interviewing** 20 volunteer subjects with varied diagnoses that included depression, osteoarthritis, multiple sclerosis, cancer, and acquired immune deficiency syndrome. Each participant was **interviewed** twice, the first

being an open-ended **interview** and the second **interview** serving to clarify information from the first.

The data were subject to content analysis using...

...s lived experience of the TT process. Data were collected from a series of videotaped **interviews**, drawings by 11 children, and the diaries of parents and the investigator. Each child drew...

...for research and may best be approached through an interdisciplinary effort. Other professionals researching subtle **energy** and **energy medicine** are striving to articulate and test a comprehensive paradigm that can account for the phenomena...for further evaluation.(79) Also, caution is advised in administering TT to patients who have **psychiatric** disorders or who have been physically abused. These patients are extremely sensitive to human interaction...

...this process "living the Therapeutic Touch" in her book by that title and describes the **process** that occurs when commitment to **healing** becomes a lifestyle. Nurses report experiencing increased vigor, confidence, commitment, and satisfaction with their work...

...Meehan(80) asserts that the simple form of meditation that informs TT practice promotes a **process** of self- **healing** in the nurse. This self-healing is congruent with Newman's(83) framework, in which...

...equivalent to health and healing. Future research investigating the psychophysiologic effects of TT on the **healer** will help elucidate this **process** of self- **healing**.

GUIDELINES FOR PRACTICE

For more than 20 years, there has been a growing body of...

...reflecting the interest and growing acceptance of it as a nursing intervention. TT policy and **procedure** guidelines for **health** professionals are published by Nurse Healers-Professional Associates, Inc.(NH-PA), the professional association that...

...Recorded data can include objective changes and patient comments and should be recorded in the **patient** 's chart and the personal journal of the **practitioner**. A journal of TT experiences is a valuable tool for skill development.

Recommendations for practice...

...in medical schools or used in hospitals in the United States. These practices include acupuncture, **chiropractic**, massage therapy, and homeopathy. Thirty-four percent of their sample of 1,539 adults used...of professional nursing. For many nurses, TT embodies the spirit of nursing practice, but others **question** its effectiveness.(91-93) Both quantitative and qualitative research must continue to build a scientific...

...most important challenges will be to create a healing environment for each patient within the **health** care **system**. Therapeutic touch is one nursing intervention that has been shown to provide nurses with a...

...Treatment is the least structured phase as it is determined by the needs of the **patient**. During this phase, **practitioners** use hands both on and off the body to facilitate energy flow. Imagery often helps...

...a directory of TT practitioners throughout the world.

International Society for the Study of Subtle **Energies** & **Energy Medicine** 356 Coldco Circle Golden, CO 80403 (303)278-2228

Pumpkin Hollow Farm 1184 Route 11...apneas during meditation. Am J

Physiol. 1989; 256:632-638.

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19960401

Set	Items	Description
S1	3821637	PSYCHIAT? OR PSYCHOSOMAT? OR PSYCHOLOG? OR PHYSIC?()THERAP? OR PSYCHOTHERAP? OR PSYCHO()THERAP? OR CHIROPRACT? OR BIOFEE- DBACK? OR BIO()FEEDBACK?
S2	41657	ENERG?(2N) (HEALTHCARE OR HEALTH()CARE OR MEDICIN?) OR NEUR- OMODULAT? OR NEURO()MODULAT? OR NMT OR ACUPRESS? OR ACU()PRES- S?
S3	4650138	PATHWAY? OR PATH() (WAY OR WAYS) OR QUERIE? OR QUERY? OR QU- ESTION? OR INTERROGAT? OR INTERVIEW?
S4	15354	(MUSCLE()RESPONSE) (5N) (TEST? OR RATE? ? OR RATING OR ASSES- S? OR APPRAIS? OR EVALUAT? OR MEASUR? OR DETERMIN? OR ESTIMAT? OR GAUG? OR DIAGNOS? OR MONITOR?) OR MRT
S5	75924	(PATIENT? OR SUBJECT? ?) (10N) (PRACTITIONER? OR THERAPIST?)
S6	15469	DNFT OR DIRECT() (NONFORCE OR NON()FORCE) ()TECHNIQUE OR MUS- CLE()TEST? OR (ORING OR O()RING) ()TEST? OR LEG()LENGTH()TEST? OR PHYSIC?()STIMULAT?
S7	9279	(SEMANTIC? OR CLINIC?) (3N)ALGORITHM?
S8	22	(CONCIOUS? OR SUBCONCIOUS?) ()LEVEL?
S9	0	(OPTIM? OR CORRECT?) (2N) (COMMAND()STATEMENT?) OR (VERBAL? - OR NONVERBAL?) ()CORRECT?()COMMAND?
S10	715742	DYSFUNCTION? OR AUTONOMIC?() (FUNCTION? OR RESPONSE?)
S11	2513697	POSTUR? OR POSITION?
S12	24446	(PATHWAY? OR PATH() (WAY OR WAYS)) (3N) (PERNICIOUS? OR SENSO- RY? OR MOTOR? OR ALLERG? OR INFECT? OR EXOGENOUS? OR TOXIN? OR MORPHIC?)
S13	18392733	METHOD? ?
S14	27254484	SYSTEM? ?
S15	8718082	PROCESS??
S16	3592027	PROCEDURE? ?
S17	9692114	TECHNIQUE? ?
S18	601849	S1:S2 AND S3
S19	49	S18 AND S4
S20	0	S19 AND S5
S21	2	S19 AND S6:S9
S22	11	S19 AND S10:S12
S23	43	S19 AND S13:S17
S24	113879	S18 AND S1:S2(5N) (TREAT? OR CURE? ? OR CURING OR CURATIV? - OR REMED? OR HEAL? OR CORRECT?)
S25	17237	S24 AND (TREAT? OR CURE? ? OR CURING OR CURATIV? OR REMED? OR HEAL? OR CORRECT?) (5N) (S13:S17 OR S5)
S26	73	S25 AND (S4 OR S6:S9 OR S12)
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S28	114	S27 AND PY<2004
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2001 (c) Action Potential
File 164: Allied & Complementary Medicine 1984-2004/May
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29/3,K/21 (Item 5 from file: 73)
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07022308 EMBASE No: 1997313102

**Alcohol and substance use disorders: Algorithms and critical pathways
for healthcare delivery**

Miller T.W.; Suchinsky R.; Leukefeld C.; Kraus R.E.
Dr. T.W. Miller, 435 Wells Hall, Murray State University, Murray, KY
42071 United States
Journal of Contemporary Psychotherapy (J. CONTEMP. PSYCHOTHER.) (United
States) 1997, 27/3 (189-200)
CODEN: JCPTB ISSN: 0022-0116
DOCUMENT TYPE: Journal; Review
LANGUAGE: ENGLISH SUMMARY LANGUAGE: ENGLISH
NUMBER OF REFERENCES: 21

**Alcohol and substance use disorders: Algorithms and critical pathways
for healthcare delivery**

...as well as by the availability of enhanced models of service delivery.
Providers are using **clinical algorithms** and **critical pathways** to
standardize clinical care and improve clinical services to patients. The
article highlights the application...

...clinical models and demonstrates their utility in the context of
substance use and abuse disorders. **Clinical algorithms** and **critical
pathways** are advanced as guidelines in diagnostic and therapeutic
processes for the delivery of quality **health** care to patients. Specific
recommendations for the development and implementation of such initiatives
are discussed...

MEDICAL DESCRIPTORS:

algorithm; health care delivery; model; patient care; practice guideline;
psychiatric diagnosis; review; substance abuse

SECTION HEADINGS:

032 **Psychiatry**
036 **Health Policy, Economics and Management**
1997

29/3,K/70 (Item 46 from file: 11)
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0001850726 2002-01273-000

Creative energies: Integrative energy psychotherapy for self-expression and healing .

SERIES TITLE: The Norton energy **psychology** series.

AUTHOR: Hover-Kramer, Dorothea
, xxii, 217, 2002

PUBLISHER: W. W. Norton & Co, Inc--New York--NY--US

Creative energies: Integrative energy psychotherapy for self-expression and healing .

SERIES TITLE: The Norton energy **psychology** series.

...ABSTRACT: Energy **psychology** comprises a family of methods for balancing the human vibrational matrix, which in turn contains...

...the counseling endeavor. This book describes the integration of the biofield, energy centers, and meridian **pathways** and their relevance to emotional healing and increased creativity. The book explores the role of the helping professional using an integrative, comprehensive energy **psychology** and seeks to enhance the professional's ability to see his or her interactions with...

...DESCRIPTORS: Eclectic **Psychotherapy** ; *...

... **Psychotherapeutic Techniques...**; **Psychotherapists** ;

IDENTIFIERS: energy **psychology** ; ...

...integrative energy **psychotherapy** ; ...

...meridian **pathways**

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II: The human vibrational matrix

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The chakras and their **psychological** meaning

The meridians and related acupoints

Assessment of patterns in the human vibrational matrix

III: Integrative energy **psychology** interventions for emotional relief

Ethical considerations for integrated energy **psychotherapy**

Relieving pervasive psychoenergetic disturbance

Addressing psychoenergetic reversals

Treatment applications for working with specific emotional issues

IV: Integrative energy **psychology** interventions for accessing creativity

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Standards of practice in comprehensive energy **psychology**
Code of ethics for practitioners of comprehensive energy **psychology**
Organizational resources for further information
Beyond ground zero: Energy concepts for addressing shock, after-effects...

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Energy diagnostic and treatment methods .

AUTHOR: Gallo, Fred P.

, xx, 233, 2000

PUBLISHER: W. W. Norton & Co, Inc--New York--NY--US

Energy diagnostic and treatment methods .

...ABSTRACT: This book describes a diagnostic system based on the practice of energy **psychology** : the application of diagnostic and **treatment methods** that are rooted in an energy paradigm. Through a variety of protocols this book guides **psychotherapists** in diagnosing and **treating psychological** problems using manual **muscle testing** and various kinesiological treatments. The author discusses theory, rationale and practice throughout the book. Suggestions and implications for the future of energy **psychology** are included. (PsycINFO Database Record (c) 2003 APA, all rights reserved)

...DESCRIPTORS: **Physical Therapy ; *** ...

...Psychotherapy

IDENTIFIERS: diagnosis & **treatment** of psychological disorders in energy **psychology**

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NeuroModulation Technique

Introducing Rationality to the World of Energetic Medicine

What is NeuroModulation Technique?

NeuroModulation Technique is a method of healing unique in all the world of health care. It is based upon widely accepted neurophysiological models. NeuroModulation Technique is a system of healing that will enable the doctor to treat conditions well out of the reach of methods we have traditionally been exposed to. It is the product of 20 years of study of all the various energetic techniques such as TBM, NAET, NET, JMT, BEST, and many others. We have known that these methods produced results; but the results were inconsistent, improving from the earlier methods to the more recent of these methods such as JMT. The goal of these methods has been to correct faulty function in the autonomic system responsible for many diseases and musculoskeletal conditions. One glaring problem that has kept many doctors away from these methods is that they are based on the use of radionically charged vials, and seemingly arbitrary reflex points. In studying these early techniques I made the decision to suspend disbelief and learn the methods, and to find out what it was that worked about them, and what was nonsense. After all, sometimes we find in the world of medical education that someone has found something that works; but doesn't

understand why it works. Some techniques have started this way and the originators have simply imagined their way to a whole complex of unsupportable and arbitrary procedures to teach.

Why Does the World of Alternative Medicine Need NMT?

Alternative medicine is no longer the redheaded stepchild of the health care system. I spoke with David Eisenberg, M.D., Director of the Division for Research & Education in Complementary & Integrative Medical Therapies Harvard Osher Institute, Harvard Medical School, and authority on alternative medicine in 2001 when he was in Portland, OR. He told me the number of visits to alternative doctors surpassed those to MD's in 1997, exhibiting a sharp increase in utilization from 1990 when visits to alternative practitioners were far fewer than those to MD's. Now that gap is even wider, and it is still growing. You can't take big business away from big business without expecting to be attacked. We in alternative care should be prepared for that. If we think we are treating patients with energetically charged vials that transmit energetic signals through their skin, but the vials are nothing more than water, we are exposed in a very real way to regulatory agencies that would love to persecute alternative doctors. Can you prove otherwise? Why take the risk when the vials and Radio Shack part assembled diagnostic and therapeutic devices we are marketed are unnecessary? We will show with digital video presentations of experiments in our offices that a.) These vials do not transmit such data to the patient, and b.) That even if the vials were capable of doing this, that they are irrelevant to NMT treatment, and even to the types of energetic techniques that utilize those vials. The results those methods

achieve is not because of the vials. I want to treat with methods grounded in science, but without giving up the kind of care that restores the body's innate health in a natural way. NMT permits the doctor to do this with efficacy never before available. NMT affords the ability to practice energetic medicine without risking ones professional license, or livelihood. I want to be able to hold my head high and tell my story with pride when someone asks me what I do and how it works. NMT empowers me to do that.

How Was NeuroModulation Technique Developed?

In developing NMT I had an insight into what it was that these previous energetic methods were inadvertently and tangentially tapping into. NeuroModulation Technique is a proprietary system of health care treatment based upon a method of accessing and assessing the autonomic control system of the patient through muscle response testing utilizing verbal and/or non-verbal semantic questions and statements. Performance of that autonomic system is modulated with a combination of verbal and/or non-verbal corrective commands and statements. This process is further augmented and reinforced with percussive, or other stimulation of vertebral segments, specific breathing patterns, and other sensory stimuli. It is based upon widely accepted neurophysiological models. There are no vials, special reflex points, or potions used. We approach very literally the proposition that the closest analogy to the human nervous system is the computer. We use a unique form of muscle response testing to access, assess the autonomic nervous system, and modulate the performance of autonomic function with specific semantic reprogramming and debugging scripts. The NMT method is based

on generally recognized principles of neurophysiology, physiology, psychology, linguistics, and anatomy and constitutes a unique and proprietary system of health care protected by applicable laws of United States patent, copyright, and trademark laws.

What Can be Treated with NeuroModulation Technique

NeuroModulation Technique produces instantaneous and profound results in virtually all forms of illness which are provoked by faults in the function of the autonomic nervous system. This list includes all allergies, chronic degenerative diseases such as all forms of arthritis; multiple sclerosis and other demylenating diseases; Crohn's disease, IBS, and gastric reflux disease; infectious disease processes; all autoimmune diseases; acute and chronic musculoskeletal conditions; addictions, emotional, psychological and sensory/motor neurologic disturbances. With NMT you will find that you have a whole new way of looking at the patient's condition. Even classic orthopedic and neurologic signs and tests take on a whole new meaning when you see these tests turn from positive at first examination of the patient to negative at the end of treatment - yet the patient has not been manipulated, or subjected to any form of physical therapy. Pain disappears instantly, spasm melts like a dusting of snow in the afternoon sun, and range of motion releases as completely and profoundly as if the patient had been through weeks of therapy and rest. The patient's autonomic nervous system has simply been accessed and modulated in the direction of normal function. NMT will change the way you look at illness. For many conditions illness now becomes a problem of data.

processing of the biocomputer. It is now subject to real time correction as you use NMT to reprogram and debug that biocomputer just as literally as you might the computer that sits on your desktop.

Our seminars will contain many video segments that track the treatment of real patients from initial presentation through the conclusion of treatment for all of the conditions discussed above. NMT seminars will devote considerable time and attention to workshopping the technique. Practitioners will leave the seminar with the confidence and the competence to use this powerful work immediately on return to their practices. We won't just talk about what NMT can do; we will show you. We will walk you through this work until you are comfortable using it, and we will revolutionize and revitalize your practice in the process. You will become the doctor that patients can't wait to tell their friends and family about.

NMT truly is a revolution in health care and you have the opportunity to be among the first to be presented with this work. Our seminars are filling rapidly with DCs, DOs, L.Ac.s, MDs, OMDs, RNs, RPTs, DDSs, DMDs, psychotherapists, and NNDs from all over the United States, Canada, and Europe. Please schedule early to insure a place. You won't be disappointed.

I hope to see you all at one of our upcoming seminars.

Leslie S. Feinberg, D.C.
NeuroModulation Technique Founder

